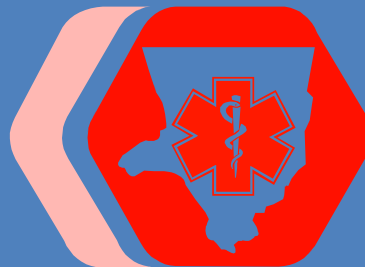


EMS REPORT FORM INSTRUCTION MANUAL



**EMERGENCY MEDICAL
SERVICES AGENCY**
LOS ANGELES COUNTY



LANCET TECHNOLOGY
Innovative Data Solutions



*REVISED:
December 2019*

TABLE OF CONTENTS

INCIDENT INFORMATION	7
SEQUENCE NUMBER	8
ORIG. SEQ. #	9
DATE	10
INC #	11
JUR STA	12
LOCATION CODE	13
MCI?	14
PD & UNIT #	15
RUN TYPE	16
PG 2	17
STREET NUMBER	18
STREET	19
APT #	20
CITY	21
INCIDENT ZIP CODE	24
PROV	25
A/B/H	26
UNIT	27
DISP	28
ARRIVAL	29
AT PT	30
LEFT	31
AT FAC	32
FAC EQUIP	33
AVAIL	34
TEAM MEMBER ID	35
PATIENT ASSESSMENT	36
PATIENT NUMBER	37
TOTAL PATIENT NUMBER	38
# PTS TRANSPORTED	39
AGE	40
AGE UNIT	41
GENDER	42
WEIGHT	43
WEIGHT UNITS	44
PEDS COLOR CODE	45
DISTRESS LEVEL	46
COMPLAINT	47
PROVIDER IMPRESSION	51
MECHANISM OF INJURY	52
TIME EXTRICATED	55
GCS	56
GLASGOW COMA SCALE- TIME	57
EYE	58
VERBAL	59
MOTOR	60
GCS TOTAL	61
NORMAL FOR PATIENT/AGE	62
STROKE	63
MLAPSS?	64

LAST KNOWN WELL DATE	65
LAST KNOWN WELL TIME	66
LAST KNOWN WELL DATE AND TIME UNKNOWN	67
FACIAL DROOP	68
ARM DRIFT	69
GRIP STRENGTH	70
TOTAL SCORE	71
THERAPIES	72
CARE PROVIDED BY PD	73
THERAPIES	74
TM #	76
TRANSPORT	77
MED. CTRL	78
PROTOCOL	79
REC FAC	81
NOTIFICATION?	83
CODE 3?	84
VIA	85
TRANS TO	86
REASON	87
AMA?	88
RELEASE AT SCENE?	89
TREAT & REFER?	90
PATIENT INFORMATION	91
LAST NAME	92
FIRST NAME	93
MI	94
DOB	95
PHONE	96
STREET NUMBER	97
STREET NAME	98
APT #	99
CITY	100
PATIENT STATE	102
PATIENT ZIP CODE	103
MILEAGE	104
INSURANCE	105
HOSP. VISIT #	106
PMD NAME	107
PARTIAL SS # (LAST 4 DIGITS)	108
COMMENTS	109
COMMENT SECTION	110
O/P,Q,R,S,T	111
HX	112
ALLERGIES	113
ALLERGIC TO ASA?	114
MEDS	115
SEDs IN PAST 48 HRS	116
SUSPECTED ETOH?	117
SUSPECTED DRUG USE?	118
IF YES:	119
ROUTE	120
PHYSICAL SIGNS	121

PUPILS	122
RESP	123
SKIN.....	124
FIRST 12 LEAD TIME	125
EMS INTERPRETATION	126
SOFTWARE INTERPRETATION	127
ARTIFACT	128
WAVY BASELINE	129
PACED RHYTHM	130
TRANSMITTED?	131
SECOND 12 LEAD TIME	132
EMS INTERPRETATION	133
SOFTWARE INTERPRETATION	134
ARTIFACT	135
WAVY BASELINE	136
PACED RHYTHM	137
TRANSMITTED?	138
SPECIAL CIRCUMSTANCES	139
DNR/AHCD/POLST?	140
POISON CONTROL CONTACTED?	141
SUSPECTED ABUSE/NEGLECT?	142
CONTACTED MED. CIRC. SUPPORT?	143
≥ 20 WKS IUP?	144
_WKS	145
BARRIERS TO PATIENT CARE	146
CARDIAC ARREST	147
ARREST DETAILS	148
REASON FOR WITHHOLDING/TERMINATING RESUSCITATION	149
VITAL SIGNS	150
TIME.....	151
TM #	152
BLOOD PRESSURE	153
PULSE	154
RR	155
O2 SAT	156
PAIN.....	157
CO2.....	158
MEDICATION/ DEFIBRILLATION	159
TIME.....	160
TM #	161
RHYTHM.....	162
MEDS/DEFIB	163
DOSE	164
DOSE UNITS	165
ROUTE	166
RESULT	167
TRANSFER OF CARE	168
CONDITION ON TRANSFER	169
MORPHINE.....	170
MIDAZOLAM.....	171
FENTANYL	172
TOTAL IV/IO FLUIDS RECEIVED	173
CARE TRANSFERRED TO	174

TRANSFER VS TIME.....	175
TM #	176
BP	177
PULSE	178
RR.....	179
O2 SAT	180
CO2.....	181
RHYTHM.....	182
CPAP PRESSURE.....	183
GCS E	184
GCS V	185
GCS M	186
GCS TOTAL.....	187
SIGNATURE TM COMPLETING FORM.....	188
ADVANCED LIFE SUPPORT CONTINUATION FORM	189
INCIDENT INFORMATION SECTION	190
VITAL SIGNS AND MEDICATION/DEFIB SECTION	191
REASON FOR ADVANCED AIRWAY	192
PM #	193
SUCCESS.....	194
TIME ET/KING START.....	195
TIME ET/KING SUCCESS	196
ETT/KING SIZE.....	197
DIFFICULT AIRWAY TECHNIQUES	198
TUBE PLACEMENT MARK AT TEETH	199
COMPLICATION(S) DURING TUBE PLACEMENT	200
INITIAL ADVANCED AIRWAY PLACEMENT CONFIRMATION	201
CAPNOGRAPHY MEASUREMENT	202
EtCO ₂ DETECTOR COLORIMETRIC	203
WAVEFORM CAPNOGRAPHY	204
ONGOING ADVANCED AIRWAY PLACEMENT CONFIRMATION	205
ONGOING VERIFICATION TIME	206
ONGOING VERIFICATION VALUE	207
SPONTANEOUS RESPIRATIONS.....	208
ONGOING VERIFICATION TIME	209
ONGOING VERIFICATION VALUE	210
SPONTANEOUS RESPIRATIONS.....	211
REASON ALS AIRWAY UNABLE	212
REASON(S) ALS AIRWAY UNABLE	213
CARDIAC ARREST/ RESUSCITATION	214
RESTORATION OF PULSE TIME	215
RESUSCITATION D/C BY BASE.....	216
PRONOUNCED BY	217
PRONOUNCED RHYTHM.....	218
COMMENTS	219
VERIFICATION OF TUBE PLACEMENT	220
VERIFICATION TECHNIQUE(S).....	221
PLACEMENT	222
SIGNED VERIFICATION	223
APPENDIX	224
PROVIDER IMPRESSION DEFINITIONS	225

INCIDENT INFORMATION

SEQUENCE NUMBER

Definition

Unique, alphanumeric EMS record number found pre-printed at the top right corner of EMS Report Form hard copies or electronically assigned to ePCRs by the EMS provider's electronic capture device

Field Values

- Consists of two letters and six digits on pre-printed EMS Report Forms; or two letters, ten digits if an approved ePCR provider

Additional Information

- **REQUIRED** for all records
- This is a unique number to the EMS Agency and must be provided to create a unique record ID within the EMS Database
- Neither sequence # format should contain spaces

Uses

- Unique patient identifier
- Essential link between other EMS Agency databases

Data Source Hierarchy

- EMS Report Form
- Auto-generated by the EMS provider's electronic capture device

ORIG. SEQ.

Definition

Unique, alphanumeric EMS record number found pre-printed at the top right corner of EMS Report Form hard copies or electronically assigned to ePCRs by the EMS provider's electronic capture device utilized by the originating provider

Field Values

- Consists of two letters and six digits on pre-printed EMS Report Forms or two letters, ten digits if an approved ePCR provider

Additional Information

- Utilized when there is more than one public provider on scene and more than one EMS Report Form or ePCR is started. This sequence number is to be utilized for all communications, e.g. Base Hospital contact
- **Do not** use when a second EMS Report Form or ePCR is started by another unit from the same provider agency
- Neither format should contain spaces

Uses

- Unique patient identifier
- Essential link between other EMS Agency databases

Data Source Hierarchy

- EMS Report Form
- Auto-generated by the EMS provider's electronic capture device

DATE

Definition

Date provider was notified of the incident

Field Values

- Collected as MMDDYYYY

Additional Information

- **REQUIRED** for all records

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider

INC

Definition

The incident number assigned by the 911 or Dispatch Center

Field Values

- Free text

Additional Information

- Positive numeric values only

Uses

- Allows for data sorting and incident tracking

Data Source Hierarchy

- 9-1-1 or Dispatch Center

JUR STA

Definition

The fire station in whose jurisdiction the incident occurred

Field Values

- Up to three-digit positive numeric value

Uses

- Incident tracking
- Epidemiological statistics

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS Provider

LOCATION CODE

Definition

The two-letter code indicating where the incident occurred

Field Values

AI	Airport/Transport Center	OF	Office
AM	Ambulance	PA	Park
BE	Beach/Ocean/Lake/River	PL	Parking Lot
CL	Cliff/Canyon	PO	Swimming Pool
CO	Private Commercial Establishment	PV	Public Venue/Event
DC	Dialysis Center	RA	Recreational Area
DO	Healthcare Provider's Office/Clinic	RE	Restaurant
FA	Farm/Ranch	RI	Residential Institution
FR	Freeway	RL	Religious Building
FS	Fire Station	RS	Retail/Store
GY	Health Club/Gym	RT	Railroad Track
HO	Home	SC	School/College/University
IN	Industrial/Construction area	ST	Street/Highway
JA	Jail	UC	Urgent Care
MB	Military Base	WI	Wilderness Area
MC	Hospital/Medical Center	OT	Other
NH	Nursing Home		

Uses

- Incident tracking
- Epidemiological statistics

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS Provider

MCI?

Definition

Field indicating whether or not the incident involved three or more patients

Field Values

- **Y:** Yes
- **N:** No

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

PD & UNIT

Definition

The abbreviation and unit number/designation of the law enforcement agency on scene

Field Values

- Free text

Additional Information

- If multiple police departments/units are on scene, document the police department/unit in charge
- Law enforcement agencies are not considered EMS providers and therefore do not have a two-letter provider code. Please do not attempt to list them as a provider.

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

RUN TYPE

Definition

Checkbox indicating the level of service required of the provider

Field Values

- **Regular Run:** Incident where patient contact is made- excludes IFTs, Public Assist, and DOAs
- **No Patient:** Includes when the unit has a false alarm, is canceled in route, or situations where no patient is found
- **Cx at Scene:** Responding unit is canceled upon arrival by provider already on scene, no patient contact is made
- **Public Assist:** Response to a request for lifting assistance (bed to chair, chair to bed, car to home, etc.) where patient has no evidence of an illness or injury
- **IFT:** Incident where patient is transferred via ALS from one acute care facility to another
- **DOA:** Patient is determined to be dead per Los Angeles County Prehospital Care Manual Reference 814
- **FireLine:** Incident where patient contact is made during FireLine Paramedic (FEMP), FireLine EMT (FEMT), or strike team assessment unit deployment
- **Mutual Aid:** Incident where units from more than one public provider agency have each completed an EMS Report Form or ePCR

Additional Information

- If Run Type is **R** then the following data elements are **REQUIRED**:
 - Complaint
 - Provider Impression
 - Team Member ID
 - Patient Last Name
- If Run Type is **D** then the following data elements are **REQUIRED**:
 - Complaint= **DO**
 - Provider Impression=**DEAD**
 - Time of 814 death
 - Exact 814 criteria the patient met

Uses

- System evaluation and monitoring
- Establishes system participants' roles and responsibilities

Data Source Hierarchy

- EMS Provider
- Auto-generated by the EMS Provider's software

PG 2

Definition

Checkbox indicating that a Page 2 Advanced Life Support Continuation Form was needed to complete the EMS report for the patient

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- The ALS Continuation Form is **REQUIRED** when an advanced airway is attempted, when resuscitation is initiated, or when a patient is pronounced dead by the base hospital physician
- May also be used when additional space is needed to clearly document care
- Must be securely attached to the EMS Report Form and copies distributed in accordance with Los Angeles County Prehospital Care Manual, References 606 and 608

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider
- Auto-generated by the EMS Provider's software

STREET NUMBER

Definition

The street number of the incident location

Field Values

- Free text

Uses

- Incident tracking
- Epidemiological statistics

Additional Information

- **REQUIRED** for every response
- For freeway incidents give the freeway number, direction, and nearest on/off ramp

Data Source Hierarchy

- 9-1-1 or Dispatch Center

STREET

Definition

The name of the street where the incident occurred

Field Values

- Free text

Uses

- Incident tracking
- Epidemiological statistics

Additional Information

- **REQUIRED** for every response

Data Source Hierarchy

- 9-1-1 or Dispatch Center

APT

Definition

The apartment number of the incident location

Field Values

- Free text

Uses

- Incident tracking
- Epidemiological statistics

Data Source Hierarchy

- 9-1-1 or Dispatch Center

CITY

Definition

The city code of the incident location

Field Values

AA	Arleta	CO	Commerce	HO	Hollywood
AC	Acton	CP	Canoga Park	HP	Huntington Park
AD	Altadena	CR	Crenshaw	HR	Harbor City
AE	Arlington Heights	CS	Castaic	HV	Hi Vista
AG	Agua Dulce	CT	Century City	HY	Hyde Park
AH	Agoura Hills	CU	Cudahy	IG	Inglewood
AL	Alhambra	CV	Covina	IN	City of Industry
AN	Athens	CY	Cypress Park	IR	Irwindale
AO	Avocado Heights	DB	Diamond Bar	JH	Juniper Hills
AR	Arcadia	DO	Downey	JP	Jefferson Park
AT	Artesia	DS	Del Sur	KG	Kagel Canyon
AV	Avalon	DU	Duarte	KO	Koreatown
AW	Atwater Village	DZ	Dominguez	LA	Los Angeles
AZ	Azusa	EL	East Los Angeles	LB	Long Beach
BA	Bel Air Estates	EM	El Monte	LC	La Canada Flintridge
BC	Bell Canyon	EN	Encino	LD	Ladera Heights
BE	Bellflower	EO	El Sereno	LE	Leona Valley
BG	Bell Gardens	EP	Echo Park	LF	Los Feliz
BH	Beverly Hills	ER	Eagle Rock	LH	La Habra Heights
BK	Bixby Knolls	ES	El Segundo	LI	Little Rock
BL	Bell	EV	Elysian Valley	LK	Lakewood
BN	Baldwin Hills	EZ	East Rancho Dominguez	LL	Lake Los Angeles
BO	Bouquet Canyon	FA	Fairmont	LM	La Mirada
BP	Baldwin Park	FL	Florence County	LN	Lawndale
BR	Bradbury	FO	Fair Oaks Ranch	LO	Lomita
BS	Belmont Shore	GA	Gardena	LP	La Puente
BT	Bassett	GF	Griffith Park	LQ	LAX
BU	Burbank	GH	Granada Hills	LR	La Crescenta
BV	Beverly Glen	GK	Glenoaks	LS	Los Nietos
BW	Brentwood	GL	Glendale	LT	Lancaster
BX	Box Canyon	GO	Gorman	LU	Lake Hughes
BY	Boyle Heights	GP	Glassell Park	LV	La Verne
BZ	Byzantine-Latino Quarter	GR	Green Valley	LW	Lake View Terrace
CA	Carson	GV	Glenview	LX	Lennox
CB	Calabasas	GW	Glendora	LY	Lynwood
CC	Culver City	HA	Hawthorne	LZ	Lake Elizabeth
CE	Cerritos	HB	Hermosa Beach	MA	Malibu
CH	Chatsworth	HC	Hacienda Heights	MB	Manhattan Beach
CI	Chinatown	HE	Harvard Heights	MC	Malibu Beach
CK	Charter Oak	HG	Hawaiian Gardens	MD	Marina Del Rey
CL	Claremont	HH	Hidden Hills	ME	Monte Nido
CM	Compton	HI	Highland Park	MG	Montecito Heights
CN	Canyon Country	HK	Holly Park	MH	Mission Hills

MI	Mint Canyon	RB	Redondo Beach	TD	Tropico
ML	Malibu Lake	RC	Roosevelt Corner	TE	Topanga State Park
MM	Miracle Mile	RD	Rancho Dominguez	TH	Thousand Oaks
MN	Montrose	RE	Rolling Hills Estates	TI	Terminal Island
MO	Montebello	RH	Rolling Hills	TJ	Tujunga
MP	Monterey Park	RK	Rancho Park	TL	Toluca Lake
MR	Mar Vista	RM	Rosemead	TO	Torrance
MS	Mount Wilson	RO	Rowland Heights	TP	Topanga
MT	Montclair	RP	Rancho Palos Verdes	TR	Three Points
MU	Mount Olympus	RS	Reseda	TT	Toluca Terrace
MV	Monrovia	RV	Rampart Village	UC	Universal City
MW	Maywood	RW	Rosewood	UP	University Park
MY	Metler Valley	SA	Saugus	VA	Valencia
NA	Naples	SB	Sandberg	VC	Venice
NE	Newhall	SC	Santa Clara	VE	Vernon
NH	North Hollywood	SD	San Dimas	VG	Valley Glen
NN	Neenach	SE	South El Monte	VI	Valley Village
NO	Norwalk	SF	San Fernando	VL	Valinda
NR	Northridge	SG	San Gabriel	VN	Van Nuys
NT	North Hills	SH	Signal Hill	VV	Val Verde
OP	Ocean Park	SI	Sierra Madre	VW	View Park
OT	Other	SJ	Silver Lake	VY	Valyermo
PA	Pasadena	SK	Sherman Oaks	WA	Walnut
PB	Pearblossom	SL	Sun Valley	WB	Willowbrook
PC	Pacoima	SM	Santa Monica	WC	West Covina
PD	Palmdale	SN	San Marino	WE	West Hills
PE	Pacific Palisades	SO	South Gate	WG	Wilsona Gardens
PH	Pacific Highlands	SP	South Pasadena	WH	West Hollywood
PI	Phillips Ranch	SQ	Sleepy Valley	WI	Whittier
PL	Playa Vista	SR	San Pedro	WK	Winnetka
PM	Paramount	SS	Santa Fe Springs	WL	Woodland Hills
PN	Panorama City	ST	Santa Clarita	WM	Wilmington
PO	Pomona	SU	Sunland	WN	Windsor Hills
PP	Palos Verdes Peninsula	SV	Stevenson Ranch	WO	Westlake
PR	Pico Rivera	SW	Sawtelle	WP	Walnut Park
PS	Palms	SX	South Central County	WR	Westchester
PT	Porter Ranch	SY	Sylmar	WS	Windsor Square
PV	Palos Verdes Estates	SZ	Studio City	WT	Watts
PY	Playa Del Rey	TA	Tarzana	WV	Westlake Village
QH	Quartz Hill	TC	Temple City	WW	Westwood

Uses

- Incident tracking
- Epidemiological statistics
- System evaluation and monitoring

Additional Information

- **REQUIRED** for every response
- City codes are found on the back of the yellow copy

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS Provider

INCIDENT ZIP CODE

Definition

The zip code of the incident location

Field Values

- Five-digit numeric value

Uses

- Incident tracking
- Epidemiological statistics
- System monitoring

Additional Information

- **REQUIRED** for every response

Data Source Hierarchy

- 9-1-1 or Dispatch Center

PROV

Definition

Two-letter provider code of the agency (or agencies) responding to the incident

Field Values

AA	American Professional Ambulance Corp.	EX	Explorer 1 Ambulance & Medical Services	RE	REACH Air Medical Service
AB	AmbuLife Ambulance, Inc.	FC	First Care Ambulance	RO	Rescue One Ambulance
AF	Arcadia Fire	FM	Firstmed Ambulance	RR	Rescue Services (Medic-1)
AH	Alhambra Fire	FS	U.S. Forest Service	RY	Royalty Ambulance
AN	Antelope Ambulance Service	GL	Glendale Fire	SA	San Marino Fire
AR	American Medical Response	GU	Guardian Ambulance Service	SB	San Bernardino County Provider
AT	All Town Ambulance, LLC	LB	Long Beach Fire	SG	San Gabriel Fire
AU	AmbuServe Ambulance	LE	Lifeline Ambulance	SI	Sierra Madre Fire
AV	Avalon Fire	LH	La Habra Heights Fire	SM	Santa Monica Fire
AW	AMWest Ambulance	LT	Liberty Ambulance	SO	Southern California Ambulance
AZ	Ambulnz Health, Inc.	LV	La Verne Fire	SP	South Pasadena Fire
BA	Burbank Airport Fire	LY	Lynch EMS Ambulance	SS	Santa Fe Springs Fire
BF	Burbank Fire	MA	Mauran Ambulance	SY	Symons Ambulance
BH	Beverly Hills Fire	MB	Manhattan Beach Fire	TF	Torrance Fire
CA	CARE Ambulance	MF	Monrovia Fire	TR	Trinity Ambulance
CB	LA County Beaches	MI	MedResponse, Inc.	UC	UCLA Emergency Services
CC	Culver City Fire	MO	Montebello Fire	UF	Upland Fire
CF	LA County Fire	MP	Monterey Park Fire	VA	Viewpoint Ambulance, Inc.
CG	US Coast Guard	MR	MedReach Ambulance	VE	Ventura County Fire
CI	LA City Fire	MT	MedCoast Ambulance	VF	Vernon Fire
CL	CAL-MED Ambulance	MY	Mercy Air	WC	West Covina Fire
CM	Compton Fire	OC	Orange County Provider	WE	Westcoast Ambulance
CS	LA County Sheriff	PE	Premier Medical Transport	WM	West Med/McCormick Ambulance Service
DF	Downey Fire	PF	Pasadena Fire	OT	Other Provider
EA	Emergency Ambulance	PN	PRN Ambulance, Inc.		
ES	El Segundo Fire	RB	Redondo Beach Fire		

Additional Information

- Law enforcement agencies are not considered EMS providers and therefore do not have a two-letter provider code. Please do not attempt to list them as a provider.
- Provider codes are found on the back of the yellow copy

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider
- Auto-generated by the EMS Provider's software

A/B/H

Definition

The highest capability of care for the responding provider unit

Field Values

- **A:** ALS
- **B:** BLS
- **H:** Helicopter

Additional Information

- Is not related to the level of care given or the acuity of the patient

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider
- Auto-generated by the EMS Provider's software

UNIT

Definition

The unit letter and number designation for the responding provider unit

Field Values

- Free text

Additional Information

- Suggested unit prefixes:
 - AU: Assessment Unit
 - AT: Assessment Truck
 - AE: Assessment Engine
 - BK: Bike
 - BT: Boat
 - CT: Cart
 - HE: Helicopter
 - PE: Paramedic Engine
 - PT: Paramedic Truck
 - SQ: Squad (no transport capability)
 - RA: Rescue (can transport)

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider
- Auto-generated by the EMS Provider's software

DISP

Definition

Time of day the provider was notified by dispatch of the incident

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- **REQUIRED** for all records

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider

ARRIVAL

Definition

Time of day the responding unit arrived at the incident location

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider

AT PT

Definition

Time of day provider reached the patient at the incident location

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- May differ from arrival at scene time
- Document in the Comments section the reason for an extended delay from arrival at scene to at patient times

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider

LEFT

Definition

Time of day provider left the incident location with the patient

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- Only applies if the unit is transporting the patient. Should not be used to document when unit left scene and went back into service

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider

AT FAC

Definition

Time of day the provider arrived at the receiving facility with the patient

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider

FAC EQUIP

Definition

Time of day the provider transferred the patient to hospital equipment

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- Field is used to calculate wall time, which is defined as the time from arrival in the ED to when patient is removed from the EMS gurney and placed on hospital equipment
- Hospital equipment may include a chair or gurney in triage or a treatment area
- Hospital equipment **does not** include using the hospital's vital sign machine to check the patient's vitals

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- EMS provider

AVAIL

Definition

Time of day the provider is available to return to service

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- **REQUIRED** for all records

Uses

- Establishes care intervals and incident timelines

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider

TEAM MEMBER ID

Definition

The identification number of personnel involved in the patient's care

Field Values

- Free text

Additional Information

- The format used for Paramedics is "P" followed by the L.A. County issued accreditation number– example P1234
- The format used for EMTs is "E" followed by the CA certification number– example E12345
- Every record must have at least one team member ID, listed in the first copy

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

PATIENT ASSESSMENT

PATIENT NUMBER

Definition

Number identifying the patient amongst the total number of patients involved in an incident

Field Values

- Up to two-digit numeric value

Additional Information

- If there is only one patient write "Pt.# 1 of 1"
- If there are two patients, and the patient is identified by the paramedics as the second patient, write "Pt.# 2 of 2"
- Patients who are not transported, such as DOAs and those who refuse transport, should also be assigned a number

Uses

- Assists with patient identification and tracking
- Identifies multiple-patient incidents
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

TOTAL PATIENT NUMBER

Definition

The total number of patients involved in the incident

Field Values

- Up to a two-digit numeric value

Additional Information

- If there is only one patient write "Pt.# 1 of 1"
- If there are two patients, and the patient is identified by the paramedics as the second patient, write "Pt.# 2 of 2"
- Patients who are not transported, such as DOAs and those who refuse transport, should also be assigned a number

Uses

- Assists with patient identification and tracking
- Identifies multiple-patient incidents
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

PTS TRANSPORTED

Definition

The total number of patients transported from an incident

Field Values

- Up to two-digit numeric value

Uses

- Assists with patient identification and tracking
- Identifies multiple-patient incidents
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

AGE

Definition

Numeric value for the age (actual or best approximation) of the patient

Field Values

- Up to three-digit numeric age value

Additional Information

- **REQUIRED** for all patient contacts
- Must also indicate a unit of age
- If the age is estimated, mark the “Est.” checkbox

Uses

- Allows for data sorting and tracking by age
- Assists with patient identification
- Epidemiological statistics

Data Source Hierarchy

- EMS Provider
- Auto-generated by the EMS Provider’s software

AGE UNIT

Definition

Checkboxes indicating units of measurement used to report the age of the patient

Field Values

- **Yrs:** Years – used for patients 2 years old or older
- **YE:** Years Estimated
- **Mos:** Months – used for patients 1 month to 23 months old
- **ME:** Months Estimated
- **Wks:** Weeks – used for patients whose age is reported in weeks instead of months
- **WE:** Weeks Estimated
- **Days:** Days – used for patients 1 to 29 days old
- **DE:** Days Estimated
- **Hrs:** Hours – used for patients who are newborn and up to 23 hours old
- **HE:** Hours Estimated

Additional Information

- **REQUIRED** for all patient contacts
- If the age is estimated, mark the “Est.” checkbox

Uses

- Allows for data sorting and tracking by age
- Assists with patient identification
- Epidemiological statistics

Data Source Hierarchy

- EMS Provider

GENDER

Definition

Checkbox indicating the gender of the patient

Field Values

- **M:** Male
- **F:** Female
- **N:** Nonbinary

Additional Information

- Patients who are undergoing or have undergone a hormonal and/or surgical sex reassignment should be coded using their stated preference
- Patients unable to state their preference should be coded according to paramedic observation/judgment
- Nonbinary is a gender option within the State of California for individuals whose gender identity is not exclusively male or female

Uses

- Assists with patient identification
- Epidemiological statistics
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

WEIGHT

Definition

Numeric value of the weight of the patient (either as stated or best approximation)

Field Values

- Up to three-digit numeric value

Additional Information

- **REQUIRED** for all patient contacts
- Must also indicate a unit of weight
- For pediatric patients, document the measured weight in kilograms obtained from the length-based pediatric resuscitation tape, if applicable
- If the pediatric patient is taller than the length-based pediatric resuscitation tape, mark the “Too Tall” checkbox, and obtain weight in estimated kilograms

Uses

- Assists with determination of appropriate treatment
- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider

WEIGHT UNITS

Definition

Checkboxes indicating units of measurement used to report patient's weight

Field Values

- **Lbs:** Pounds
- **Kg:** Kilograms

Additional Information

- **REQUIRED** for all patient contacts
- For pediatric patients, document the measured weight in kilograms obtained from the length-based pediatric resuscitation tape, if applicable
- If the pediatric patient is taller than the length-based pediatric resuscitation tape, mark the "Too Tall" checkbox, and obtain weight in estimated kilograms

Uses

- Assists with determination of appropriate treatment
- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider

PEDS COLOR CODE

Definition

Color that corresponds with the length of an infant or child as measured on a length-based pediatric resuscitation tape

Field Values

- Grey: **3, 4, or 5** kg (newborn infants)
- PInk: 6-7 kg (~3 -6 mos)
- **Red**: 8-9 kg (~7-10 mos)
- P**U**rpLe: 10-11 kg (~12-18 mos)
- **Y**ellow: 12-14 kg (~19-35 mos)
- **W**hite: 15-18 kg (~3-4 yrs)
- **B**lue: 19-22 kg (~5-6 yrs)
- **O**range: 24-28 kg (~7-9 yrs)
- Gr**E**en: 30-36 kg, or about 80 lbs (~10-12 yrs)
- **T**oo Tall: patient is longer than tape

Additional Information

- **REQUIRED** for all pediatric ALS patients
- Document the measured weight in kilograms obtained from the length-based pediatric resuscitation tape, if applicable
- If the pediatric patient is taller than the length-based pediatric resuscitation tape, mark the “Too Tall” checkbox, and obtain weight in estimated kilograms

Uses

- Assists with determination of appropriate treatment
- Epidemiological statistics
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

DISTRESS LEVEL

Definition

Checkboxes indicating the EMS providers' impression of the level of discomfort or severity of illness of the patient, based on assessment of signs, symptoms, and complaints

Field Values

- **None:** The patient appears well and has no acute signs or symptoms related to the incident. Advanced life support techniques and transportation may not be necessary
- **Mild:** Indicates that the patient does not have a life-threatening problem. Advanced life support techniques and transportation may not be necessary
- **Moderate:** Patient may have a life-threatening problem, or the degree of patient discomfort is high. Advanced life support techniques, base hospital contact, and patient transportation are usually necessary
- **Severe:** Refers to a life-threatening condition. Advanced life support techniques, base hospital contact, and patient transportation are generally necessary

Uses

- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

COMPLAINT

Definition

Two-letter code(s) representing the patient's most significant medical or trauma complaints

Field Values- Trauma Codes

- **No Apparent Injury (NA)**: No complaint, or signs or symptoms of injury following a traumatic event
- **BUrns/Elec. Shock (BU)**: Thermal or chemical burn, or electric shock
- **Critical Burn (CB)**: Patients ≥ 15 years of age with 2nd (partial thickness) and 3rd (full thickness) degree burns involving $\geq 20\%$ Total Body Surface Area (TBSA) **OR** patients ≤ 14 years of age with 2nd and 3rd degree burns involving 10% TBSA
- **SBP <90 (<70 if under 1y) (90)**: Systolic blood pressure less than 90mmHg in a patient greater than one year of age (or systolic blood pressure less than 70mmHg in a patient less than one year of age) following a traumatic event
- **RR <10/>29 (<20 if <1y) (RR)**: A sustained respiratory rate greater than 29 breaths/minute, or respiratory rate of less than 10 breaths/minute (or less than 20 breaths/minute in a patient less than one year of age), following a traumatic event
- **Susp. Pelvic FX (SX)**: Suspected pelvic fracture, excluding isolated hip fractures from a ground level fall
- **Spinal Cord Injury (SC)**: Suspected spinal cord injury, or presence of weakness/paralysis/parasthesia following a traumatic event
- **Inpatient Trauma (IT)**: Interfacility transfer (IFT) of an admitted, injured patient from one facility to an inpatient bed at another facility, excluding ER to ER transfers
- **Uncontrolled Bleeding (UB)**: Extremity bleeding requiring the use of a tourniquet or hemostatic dressing
- **Minor Lacerations (BL or PL)**: Superficial or non-serious lacerations, abrasions, or contusions involving the skin or subcutaneous tissue, due to blunt or penetrating force
- **Trauma Arrest (BT or PT)**: Cessation of cardiac output and effective circulation due to blunt or penetrating force
- **Head (BH or PH)**: Injury to the head or skull in the area from above the eyebrows to behind the ears, due to blunt or penetrating force. This code can also be applied in association with facial injuries when it is likely that the brain is involved
- **GCS ≤ 14 (14)**: Blunt force head injury associated with a Glasgow Coma Scale score of less than or equal to 14
- **Face/mouth (BF or PF)**: Injury to the anterior aspect of the face, mouth, or skull, from and including the eyebrows, down to and including the angle of the jaw and the ears, due to blunt or penetrating force
- **Neck (BN or PN)**: Injury or pain to the area between the angle of the jaw and clavicles (including probable cervical spine injuries) due to blunt or penetrating force
- **Back (BB or PB)**: Injury to the area from the shoulders to the buttocks (but not including the buttocks) due to blunt or penetrating force
- **Chest (BC or PC)**: Injury to the anterior chest in the area between the clavicle and the xyphoid process, bordered on either side by the posterior axillary line, due to blunt or penetrating force

- **Flail Chest (FC)**: Blunt force injury to the chest wall resulting in an unstable chest wall, characterized by paradoxical chest wall movement with respirations
- **Tension Pneum (BP or PP)**: Air enters the pleural space due to blunt or penetrating force, and creates pressure on chest organs. Signs and symptoms can include: SOB, tachypnea, decreased or absent lung sounds on one side, shock, neck vein distention, and/or tracheal deviation
- **Abdomen (BA or PA)**: Injury to any of the abdominal quadrants, flanks, or pelvis due to blunt or penetrating force
- **Diffuse Abd. Tender. (BD)**: Blunt force injury to the abdomen resulting in tenderness in two or more quadrants
- **Genitals (BG or PG)**: Injury to the external reproductive structures due to blunt or penetrating force
- **Buttocks (BK or PK)**: Injury to the buttocks due to blunt or penetrating force
- **Extremities (BE or PE)**: Injury or pain to the shoulders, arms, hands, legs, or feet due to blunt or penetrating force
- **EXtr ↑ knee/elbow (PX)**: Penetrating force injury to an extremity, proximal to (above) the knee or elbow
- **FRactures ≥ 2 long bones (BR)**: Blunt force injury resulting in apparent fracture of 2 or more proximal long bones (humerus, femur)
- **Amputatlon ↑ wrist/ankle (BI or PI)**: Amputation proximal to (above) the wrist or ankle due to blunt or penetrating force
- **Neur/Vasc/Mangled (BV or PV)**: Injury to an extremity with neurological and/or vascular compromise, or that is crushed, degloved, or mangled due to blunt or penetrating force

Field Values – Medical Codes

- **Agitated Delirium (AD)**: Acute onset of extreme agitation and combative or bizarre behavior that may be accompanied by paranoid delusions, hallucinations, aggression with unusual increase in human strength, and hyperthermia
- **Abd/Pelvic Pain (AP)**: Pain or discomfort in the abdomen or pelvic region not associated with trauma
- **Allergic Reaction (AR)**: Acute onset of rash, hives, itching, redness of the skin, runny nose, facial and/or airway swelling, wheezing, shortness of breath, and/or abdominal pain in apparent reaction to ingestion or contact with a substance
- **Altered LOC (AL)**: Any state of arousal other than normal, such as confusion, lethargy, combativeness, coma, etc., not associated with trauma
- **Apneic Episode (AE)**: Episode of cessation of respiration for a brief or prolonged period of time
- **BEHavioral (EH)**: Abnormal behavior of apparent mental or emotional origin
- **Bleeding Other Site (OS)**: Bleeding from a site not elsewhere listed that is not associated with trauma (e.g. dialysis shunt)
- **Brief Resolved Unexplained Event (RU)**: Also known as “BRUE” – a brief, and now resolved, episode of at least one of the following in children less than 1yr of age: cyanosis or pallor; absent, decreased, or irregular breathing; marked change in tone (hyper- or hypotonia); & altered level of consciousness
- **Cardiac Arrest (CA)**: Sudden cessation of cardiac output and effective circulation not associated with trauma
- **Chest Pain (CP)**: Pain in the anterior chest occurring anywhere from the clavicles to the lower costal margins not associated with trauma

- **CH**oking/Airway Obstruction (**CH**): Acute onset of apnea, choking and/or difficulty breathing due to apparent partial or complete obstruction of the airway
- **C**ough/**C**ongestion (**CC**): Cough and/or congestion in the chest, nasal passages, or throat
- **D**evice **C**omplaint (**DC**): Any complaint associated with a patient's existing medical device (e.g. G-tube, AICD, ventilator, etc.)
- **D**izzy (**DI**): The patient complains of sensation of spinning or feeling off-balance. If associated with complaint of weakness, code both complaints
- **DOA** (**DO**): Patient is determined to be dead upon arrival of EMS, as per the Prehospital Care Manual
- **DY**srhythmia (**DY**): Cardiac monitor indicates an abnormal cardiac rhythm (SVT, VT, etc.)
- **F**Ever (**FE**): Patient exhibits or complains of an elevated body temperature
- **F**oreign **B**ody (**FB**): Patient complains of a foreign body anywhere in the body
- **G**I **B**leed (**GI**): Signs or symptoms of gastrointestinal bleeding such as vomiting blood, coffee-ground emesis, melena, rectal bleeding, etc.
- **H**ead **P**ain (**HP**): Headache or any other type of head pain not associated with trauma
- **H**Ypoglycemia (**HY**): Patient is symptomatic and has a measured blood glucose level that is below normal
- **I**npatient **M**edical (**IM**): Interfacility transfer (IFT) of an admitted, ill (not injured) patient from one facility to an inpatient bed at another facility
- **L**abor (**LA**): Patient is greater than 20 weeks pregnant, and experiencing signs or symptoms of labor such as uterine contractions, vaginal bleeding, spontaneous rupture of membranes, crowning, etc.
- **L**ocal **N**euro Signs (**LN**): Weakness, numbness, or paralysis of a body part or region – including slurred speech, facial droop, and/or expressive aphasia
- **N**ausea/**V**omiting (**NV**): Patient is vomiting, or complains of nausea and/or vomiting
- **N**ear **D**rowning (**ND**): Submersion causing water inhalation, unconsciousness, or death
- **N**eck/**B**ack **P**ain (**NB**): Pain in any area from base of skull and the shoulders to the buttocks not associated with trauma
- **N**e**W**born (**NW**): Newborn infant delivered out of the hospital setting
- **N**o Medical **C**omplaint (**NC**): No complaint, or signs or symptoms of illness in a patient not involved in a traumatic event
- **N**Osebleed (**NO**): Bleeding from the nose, not associated with trauma
- **O**Bstetrics (**OB**): Any complaints, signs, or symptoms which may be related to a known pregnancy (e.g., bleeding, abdominal pain/cramping, high blood pressure, edema, convulsions, severe headaches)
- **O**ther **P**ain (**OP**): Complaint of pain at a site not listed, and which is not associated with trauma (e.g. toothache, ear pain, etc.)
- **O**ver**D**ose (**OD**): Ingestion of or contact with a drug or other substance in quantities greater than recommended or generally practiced
- **P**Oisoning (**PO**): Ingestion of or contact with a toxic substance
- **P**alpitation**S** (**PS**): Sensation that the heartbeat is irregular or fast
- **R**espiratory **A**rrrest (**RA**): Sudden cessation of breathing not associated with trauma
- **S**Eizure (**SE**): Convulsions or involuntary body movements or gaze (not associated with trauma), or signs, symptoms, or history of recent seizure

- **Shortness of Breath (SB):** Sensation of not being able to catch one's breath, and/or signs or symptoms of difficulty breathing such as gasping, wheezing, rapid respiratory rate, cyanosis, retractions, use of accessory muscles, etc.
- **SYncope (SY):** Transient loss of consciousness, including sensation of "near syncope" when other associated symptoms such as weakness/dizziness do not apply
- **VA**ginal Bleeding (**VA**): Abnormal vaginal bleeding
- **WE**akness (**WE**): Patient complains of feeling weak, or exhibits signs or symptoms of decreased strength and/or muscle tone
- **OT**her (**OT**): Signs or symptoms not listed above, that are not associated with trauma

Additional Information

- OT (Other) is **never** the first complaint if there is a defined complaint and should only be used if no other complaint fits the patient's presentation
- If the patient has multiple complaints, enter in order of significance
- Do not document the same complaint twice
- Patients with a mechanism of injury documented must also have a trauma chief complaint code and trauma provider impression documented – and vice versa
- Medical complaints should not be documented with trauma complaints, unless it is suspected that a medical complaint preceded/caused the injury, or vice versa (e.g., chest pain/dizziness that caused an MVA, or seizure activity following a blow to the head.) Do not document a medical complaint such as "HP" (head pain) if the pain is due to a gunshot wound to the head – instead use only the trauma code of "PH."

Uses

- System evaluation and monitoring
- Epidemiological statistics

Data Source Hierarchy

- EMS Provider

PROVIDER IMPRESSION

Definition

Four-letter codes representing the paramedic's primary impression of the patient's presentation

Field Values

ABOP	Abdominal Pain/Problems	ELCT	Electrocution	PREG	Pregnancy Complications
AGDE	Agitated Delirium	ENTP	ENT/Dental Emergencies	LABR	Pregnancy/Labor
CHOK	Airway Obstruction/Choking	NOBL	Epistaxis	RARF	Respiratory Arrest/Failure
ETOH	Alcohol Intoxication	EXNT	Extremity Pain/Swelling – Non-Traumatic	SOBB	Resp. Distress/Bronchospasm
ALRX	Allergic Reaction	EYEP	Eye Problem – Unspecified	RDOT	Resp. Distress/Other
ALOC	ALOC – Not Hypoglycemia or Seizure	FEVR	Fever	CHFF	Resp. Distress/Pulmonary Edema/CHF
ANPH	Anaphylaxis	GUDO	Genitourinary Disorder – Unspecified	SEAC	Seizure – Active
PSYC	Behavioral/Psychiatric Crisis	DCON	HazMat Exposure	SEPI	Seizure – Postictal
BPNT	Body Pain – Non Traumatic	HPNT	Headache – Non-Traumatic	SEPS	Sepsis
BRUE	BRUE	HYPR	Hyperglycemia	SHOK	Shock
BURN	Burns	HYTN	Hypertension	SMOK	Smoke Inhalation
COMO	Carbon Monoxide	HEAT	Hyperthermia	STNG	Stings/Venomous Bites
CANT	Cardiac Arrest– Non-Traumatic	HYPO	Hypoglycemia	STRK	Stroke/CVA/TIA
DYSR	Cardiac Dysrhythmia	HOTN	Hypotension	DRWN	Submersion/Drowning
CPNC	Chest Pain – Not Cardiac	COLD	Hypothermia/Cold Injury	SYNC	Syncope/Near Syncope
CPMI	Chest Pain – STEMI	INHL	Inhalation Injury	CABT	Traumatic Arrest – Blunt
CPSC	Chest Pain – Suspected Cardiac	LOGI	Lower GI Bleeding	CAPT	Traumatic Arrest – Penetrating
BRTH	Childbirth (Mother)	FAIL	Medical Device Malfunction – Fail	TRMA	Traumatic Injury
COFL	Cold/Flu Symptoms	NAVM	Nausea/Vomiting	UPGI	Upper GI Bleeding
DRHA	Diarrhea	BABY	Newborn	VABL	Vaginal Bleeding
DIZZ	Dizziness/Vertigo	NOMC	No Medical Complaint	WEAK	Weakness – General
DEAD	DOA – Obvious Death	ODPO	Overdose/Poisoning/Ingestion		
DYRX	Dystonic Reaction	PALP	Palpitations		

Additional Information

- **REQUIRED** for all patient contacts
- Do not document more than one copy of the same Provider Impression code

Uses

- System evaluation and monitoring
- Epidemiological statistics

Data Source Hierarchy

- EMS provider

MECHANISM OF INJURY

Definition

Checkboxes indicating how the patient was injured

Field Values

- Protective Devices – **HeLmet (HL)**: The patient riding on an unenclosed motorized vehicle/bicycle was wearing a helmet at the time of impact
- Protective Devices – **Seat Belt (SB)**: Patient was wearing a seat belt at the time of impact
- Protective Devices – **AirBag (AB)**: Airbag deployed at the time of impact and directly protected the patient
- Protective Devices – **Car Seat/Booster (CS)**: The patient was riding in a car seat or booster at the time of impact
- **Enclosed Veh. (EV)**: Patient involved in collision while in an enclosed vehicle, such as an automobile, bus, or other enclosed motorized vehicle
- **Ejected (EJ)**: Patient was fully or partially thrown from a vehicle, including convertibles and trucks. Does **NOT** include motorcycles
- **EXtricated @ (EX)**: Time of day that the patient was removed from the vehicle when use of a pneumatic tool was required
- **Passenger Space Intrusion (PS)**: Intrusion of greater than 12 inches into an occupied passenger space of a motor vehicle, or greater than 18 inches into an unoccupied passenger space – check this box if amount of intrusion is not known or not specified by paramedics
- **12**: Intrusion of greater than 12 inches into an occupied passenger space of a motor vehicle – check this box when amount of intrusion is specified by paramedics
- **18**: Intrusion of greater than 18 inches into an unoccupied passenger space – check this box when amount of intrusion is specified by paramedics
- **Survived Fatal Accident (SF)**: The patient survived a collision where another person **in the same vehicle** was fatally injured
- **Impact > 20mph unenclosed (20)**: An unenclosed transport crash (e.g., skateboard, bicycle, horse, etc.) with an estimated impact greater than 20mph
- **Ped/Bike Run Over/Thrown/>20mph (RT)**: Pedestrian, bicyclist, or motorcyclist struck by an automobile and is thrown, run over, or has an estimated impact of greater than 20mph
- **Ped/Bike < 20mph (PB)**: Pedestrian, bicyclist, or motorcyclist struck by a motorized vehicle, who is NOT thrown or run over, at an estimated impact of less than 20mph
- **Motorcycle/Moped (MM)**: The patient was riding on a motorcycle or moped at the time of impact
- **TAser (TA)**: Injury due to the deployment of a conducted electrical weapon (CEW), e.g. Taser®
- **SPorts/Rec (SP)**: Any injury that occurs during a sporting or recreational athletic activity, such as aerobics, football, jogging, etc.
- **ASsault (AS)**: Patient was physically assaulted (kicked, punched, strangled, etc.) by means other than stabbing or shooting

- **STabbing (ST)**: A sharp or piercing instrument (e.g. knife, broken glass, ice pick, etc.) caused an injury which penetrated the skin
- **GSW (GS)**: Gunshot Wound - injury was caused by discharge of a gun (accidental or intentional)
- **ANimal Bite (AN)**: The teeth of a human, reptile, dog, cat, or other animal inflicted an injury, whether or not the skin was punctured. Insect bites and bee stings are not considered animal bites, and should be coded as "Other"
- **CRush (CR)**: Injury sustained as the result of external pressure being placed on body parts between two opposing forces
- **Special Considerations (SC)**: Injured patient that meet Special Considerations due to age greater than 55 years, pregnancy > 20 weeks, age greater than 65 years with a systolic BP of less than 110mmHg, or patients in blunt traumatic full arrest who, based on a paramedic's thorough patient assessment, believes transport is indicated
- **AntiCoagulants (AC)**: Injured patient is on anticoagulant medication other than aspirin (excludes minor extremity injury)
- **Telemetry Data (TD)**: Vehicle telemetry data is encountered that is consistent with high risk of serious injury
- **FAil (FA)**: Any injury resulting from a fall from any height
- **>15 ft. (>10 ft. Peds) (15)**: A vertical, uninterrupted fall of greater than 15 feet for an adult or greater than 10 feet or 3 times the height of the child for a pediatric patient. This mechanism is a subcategory of "Fall." This does not include falling down stairs or rolling down a sloping cliff.
- **Self-Inflict'd/Accid. (SA)**: The injury appears to have been accidentally caused by the patient
- **Self-Inflict'd/Intent. (SI)**: The injury appears to have been intentionally caused by the patient
- **Electrical Shock (ES)**: Passage of an electrical current through body tissue as a result of contact with an electrical source
- **Thermal Burn (TB)**: Burn caused by heat
- **Hazmat Exposure (HE)**: The patient was exposed to toxic or poisonous agents, such as liquids, gases, powders, foams, or radioactive material
- **Work- Related (WR)**: Injury occurred while patient was working, and may be covered by Worker's Compensation
- **UNknown (UN)**: The cause or mechanism of injury is unknown
- **OTHer (OT)**: A cause of injury that does not fall into any of the existing categories

Additional Information

- Patients with a mechanism of injury documented must also have a trauma chief complaint code documented – and vice versa
- If the patient has multiple mechanisms of injury, enter in order of significance
- Check all that apply
- Mechanisms of injury listed in **red** meet trauma triage criteria for transport to the nearest available trauma center
- Mechanisms of injury listed in **blue** meet trauma guidelines for transport to the nearest available trauma center - strong consideration should be given to a trauma center destination

- Cannot have a MOI that is only Anticoagulants (AC) or Special Considerations (SC), an additional mechanism of injury must be entered

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

TIME EXTRICATED

Definition

Time of day that the patient was removed from the vehicle when use of a pneumatic tool was required

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- Required if MOI= EX

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

GCS

GLASGOW COMA SCALE- TIME

Definition

Time of day when the patient's initial, and subsequent if applicable, Glasgow Coma Scale was performed

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- **REQUIRED** on all patients who are one year of age and older

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

EYE

Definition

The Glasgow Coma Scale numerical value that corresponds to the patient's initial and subsequent, if applicable, eye opening response to stimuli

Field Values

- **4:** Spontaneous – opens eyes spontaneously, no stimuli required
- **3:** To Verbal – opens eyes only when spoken to or asked
- **2:** To Pain – opens eyes only in response to noxious stimuli such as sternal rub or nail bed pressure
- **1:** None – patient does not open eyes in response to noxious stimuli

Additional Information

- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Element necessary to calculate the overall GCS score
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

VERBAL

Definition

The Glasgow Coma Scale numerical value that corresponds to the patient's initial and subsequent, if applicable, verbal response to stimuli

Field Values – Adult and Verbal Pediatric Patients

- **5:** Oriented x 3 – patient is oriented to person, time, and place
- **4:** Confused – patient may respond to questions coherently, but is disoriented or confused
- **3:** Inappropriate – random words or speech unrelated to questions or conversation
- **2:** Incomprehensible – makes incoherent sounds or moans only
- **1:** None – patient has no verbal response to noxious stimuli

Field Values – Infants and Toddlers

- **5:** Smiles and tracks objects, speech appropriate for age
- **4:** Cries but consolable, or confused
- **3:** Inconsistently consolable, or random words
- **2:** Moaning, incoherent sounds only
- **1:** No verbal response to noxious stimuli

Additional Information

- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Element necessary to calculate the overall GCS score
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

MOTOR

Definition

The Glasgow Coma Scale numerical value that corresponds to the patient's initial and subsequent, if applicable, motor response to stimuli

Field Values

- **6:** Obedient – obeys verbal commands / spontaneous purposeful movement
- **5:** Purposeful – purposeful movement is made in response to noxious stimuli (e.g., attempts to push away or grab source of stimuli)
- **4:** Withdrawal – withdraws body part from source of noxious stimuli
- **3:** Flexion –extremities move towards body core in response to noxious stimuli (decorticate posturing)
- **2:** Extension – extremities move away from body core in response to noxious stimuli (decerebrate posturing)
- **1:** None – patient has no motor response to noxious stimuli

Additional Information

- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Element necessary to calculate the overall GCS score
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

GCS TOTAL

Definition

Sum of the three numerical values documented for each element of the patient's initial and subsequent, if applicable, Glasgow Coma Scale score(s)

Field Values

- One- or two-digit numeric value between 3 and 15

Additional Information

- Maximum total score is 15, which is considered normal. Minimum score possible is 3, which may indicate severe or fatal brain injury
 - 3 to 8 may indicate severe brain injury
 - 9 to 13 may indicate moderate brain injury
 - 14 or 15 may indicate mild or no brain injury
- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

NORMAL FOR PATIENT/AGE

Definition

Patient's behavior and mentation, although perhaps not typical of most patients, is reported by family, caregivers, etc., to be the same as it was before the incident

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- Can be used on patients who suffer from mental illness, dementia, developmental delays, etc. and on infants and children who are age appropriate

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Family member
- Caregiver
- EMS provider

STROKE

mLAPSS?

Definition

Checkbox indicating whether the patient met all Modified Los Angeles Prehospital Stroke Screen (mLAPSS) criteria as defined in Reference No. 521 – Stroke Patient Destination

Field Values

- **M:** Met
- **N:** Not met

Additional Information

- mLAPSS criteria include:
 - No history of seizures or epilepsy
 - Age ≥ 40
 - At baseline, patient is not wheel-chair bound or bedridden
 - Blood glucose value between 60 and 400mg/dL
 - Obvious asymmetry or unilateral weakness is observed in one or more of the following:
 - Facial Smile/Grimace
 - Grip
 - Arm Strength
- **REQUIRED** for all patients with a chief complaint of “LN”, a provider impression code of “STRK”, or with a destination of a Primary Stroke Center, “PSC”, or Comprehensive Stroke Center, “CSC”
- If mLAPSS performed, blood glucose value must also be documented
- Patients who meet mLAPSS criteria should have a LAMS performed. If the LAMS score is < 4 , the patient should be transported to the nearest available Primary Stroke Center. If the LAMS score is ≥ 4 , the patient should be transported to the nearest available Comprehensive Stroke Center

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

LAST KNOWN WELL DATE

Definition

Date when the patient was last known to be well, symptom-free, at baseline, or usual state of health

Field Values

- Collected as MMDDYYYY

Additional Information

- **REQUIRED** for all patients with a “Y” value for “mLAPSS Met,” or with a destination of a Primary or Comprehensive Stroke Center for suspected stroke
- Should only be used for suspected stroke patients

Uses

- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver
- EMS provider

LAST KNOWN WELL TIME

Definition

Time of day when the patient was last known to be well, symptom-free, at baseline, or usual state of health

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- **REQUIRED** for all patients with a “Y” value for “mLAPSS Met,” or with a destination of a Primary or Comprehensive Stroke Center for suspected stroke
- Should only be used for suspected stroke patients

Uses

- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver
- EMS provider

LAST KNOWN WELL DATE AND TIME UNKNOWN

Definition

The date and/or time the patient was last known to be well, symptom-free, at baseline, or usual state of health is not known

Field Values

- **U:** Unknown

Additional Information

- Should only be used for suspected stroke patients

Uses

- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver
- EMS provider

FACIAL DROOP

Definition

The numerical value that corresponds to the presence, or absence, of a facial droop in a suspected stroke patient

Field Values

- **0:** Absent
- **1:** Present

Additional Information

- **REQUIRED** on all suspected stroke patients with a positive mLAPSS
- LAMS components are found on the back of the red copy

Uses

- Element necessary to calculate the overall LAMS score
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

ARM DRIFT

Definition

The numerical value that corresponds to the presence, or absence, of an arm drift in a suspected stroke patient

Field Values

- **0:** Absent
- **1:** Drifts down
- **2:** Falls rapidly

Additional Information

- **REQUIRED** on all suspected stroke patients with a positive mLAPSS
- If patient is unable to lift their arms, lift arms for the patient and observe either a slow drift down or a rapid fall
- LAMS components are found on the back of the red copy

Uses

- Element necessary to calculate the overall LAMS score
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

GRIP STRENGTH

Definition

The numerical value that corresponds to the quality of the grip strength in a suspected stroke patient

Field Values

- **0:** Normal
- **1:** Weak grip
- **2:** No grip

Additional Information

- **REQUIRED** on all suspected stroke patients with a positive mLAPSS
- LAMS components are found on the back of the red copy

Uses

- Element necessary to calculate the overall LAMS score
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TOTAL SCORE

Definition

Sum of the three numerical values documented for facial droop, arm drift, and grip strength in a suspected stroke patient

Field Values

- One-digit numeric value between 0 and 5

Additional Information

- A large vessel occlusion should be suspected in patients with a score of ≥ 4 , therefore these patients should be transported to the closest comprehensive stroke center
- Patients with a score < 4 should be transported to the closest primary stroke center
- **REQUIRED** on all suspected stroke patients with a positive mLAPSS
- LAMS components are found on the back of the red copy

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

THERAPIES

CARE PROVIDED BY PD

Definition

Checkbox indicating what procedure(s) were performed on the patient by members of law enforcement prior to EMS arrival

Field Values

- **TourniQ**uet: A device for stopping the flow of blood through a vein or artery was applied to the patient by law enforcement personnel
- **NarC**an: Law enforcement personnel administered Narcan to the patient
- **Hemostatic D**ressing: A hemostatic dressing was applied to the patient by law enforcement personnel; for use by approved law enforcement personnel only

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

THERAPIES

Definition

Checkbox indicating what procedure(s) were performed on the patient

Field Values

- Assisted with **Home Meds**: EMS personnel assisted the patient with administration of their home meds
- **Back Blows/Thrust**: Performed for suspected foreign body obstruction
- **BMV**: Respirations are assisted with bag-valve-mask device
- **CO2**: Numeric value indicating the concentration of carbon dioxide measure by the capnometer during bag-mask ventilation
- **Breath Sounds**: Assessment performed to determine efficacy of bag-valve-mask ventilation
- **Chest Rise**: Assessment performed to determine efficacy of bag-valve-mask ventilation
- **Existing Trach**: Reason why bag-valve-mask ventilation is performed
- **OP/NP Airway**: An airway adjunct was placed; circle which adjunct was used
- **Cooling Measures**: Cooling measures performed by removing clothing, applying cool, damp cloths, fanning patient, etc.
- **DRessings**: Dressing was applied to the patient by EMS personnel
- **Ice Pack**: An ice pack was applied to the patient by EMS personnel
- **TourniQuet**: A device for stopping the flow of blood through a vein or artery was applied to the patient by EMS personnel
- **Hemostatic Dressing**: A hemostatic dressing was applied to the patient by EMS personnel; for use by approved providers only
- **OX_lpm**: Oxygen was delivered to the patient, specify the numeric value, between 2 and 15, of the number of liters per minute in the space provided
- **NC**: Oxygen was delivered to the patient via nasal cannula
- **Mask**: Oxygen was delivered to the patient via oxygen mask
- **REstraints**: Restraints were applied to the patient and/or monitored by EMS personnel
- **Distal CMS Intact**: Circulation, motor function, and sensation of extremities were intact after restraint application or splinting
- **Spinal Motion Restriction**: Patient was placed in spinal motion restriction
 - **C-Collar**: Patient was placed in a c-collar
- **Backboard**: A backboard was used as an extrication or splinting device
- **CMS Intact – Before**: Circulation, motor function, and sensation were intact in all extremities prior to spinal immobilization
- **CMS Intact – After**: Circulation, motor function, and sensation were intact in all extremities after spinal immobilization
- **SPlint**: A splint was applied to the patient by EMS personnel
- **Traction Splint**: A traction splint device was applied to the patient by EMS personnel
- **SUction**: The patient's airway was suctioned by EMS personnel
- **BLd Gluc #1_ #2**: The patient's initial, and subsequent if applicable, blood glucose measurement
- **CPAP** ___cm H2O, Time:___: Continuous positive airway pressure device was used to

deliver oxygen to the patient; document beginning pressure (measured in cm H₂O) and time applied

- **FB Removal:** A foreign body was removed from the patient's airway via visualization and Magill forceps
- **IV__g __site:** IV access was established; document the gauge and site on the lines provided
- **IO__g:** IO access was established; document the gauge on the line provided
 - Site: checkbox indicating the site, **HU**merus or **TibiA**, where the IO was established
- **Needle THoracostomy:** A needle thoracostomy was performed on the patient
 - Site: checkbox indicating the site, **2nd ICS** or **4th ICS**, where the needle thoracostomy was performed on the patient
- **Vagal M**aneuver: Technique performed in an attempt to slow down the patient's heart rate
- **TC** Pacing __mA, __bpm, Time__: Transcutaneous pacing was initiated on the patient; document mA, rate (bpm), and time started on the lines provided
- **OT**her: EMS personnel perform a therapy that is not listed above

Additional Information

- If the patient is in restraints, use the Comments section to document location of restraints, patient position, and quality of circulation distal to restraints
- Use the Comments section of the form to document the patient's response to therapies administered, any pressure adjustments made during CPAP administration, and the location of the placement of dressings, tourniquets, hemostatic dressings, and splints

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TM

Definition

The team member number of the personnel who performed or attempted the procedure

Field Values

- Numeric values only

Additional Information

- If more than one team member performs the therapy, enter the number of the team member who initiated the therapy

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

TRANSPORT

MED. CTRL.

Definition

The three-letter-code indicating whether medical control was provided by a protocol, a base hospital, or a medical director/EMS fellow on scene or if the EMS provider contacted the MAC

Field Values

AMH	Methodist Hospital of Southern California	PIH	PIH Health Hospital - Whittier
AVH	Antelope Valley Hospital	PVC	Pomona Valley Hospital Medical Center
CAL	Dignity Health - California Hospital Medical Center	QVH	Emanate Health Queen of the Valley Hospital
CSM	Cedars Sinai Medical Center	SFM	St. Francis Medical Center
GWT	Adventist Health - Glendale	SJS	Providence Saint Joseph Medical Center
HCH	Providence Holy Cross Medical Center	SMM	Dignity Health - Saint Mary Medical Center
HGH	LAC Harbor - UCLA Medical Center	TOR	Torrance Memorial Medical Center
HMH	Huntington Hospital	UCL	Ronald Reagan UCLA Medical Center
HMN	Henry Mayo Newhall Hospital	USC	LAC + USC Medical Center
LBM	MemorialCare Long Beach Medical Center	MAC	Medical Alert Center
LCM	Providence Little Company of Mary Medical Center - Torrance	MTP	Medical Treatment Protocol
NRH	Dignity Health - Northridge Hospital Medical Center	MDS	Medical Director/EMS Fellow on Scene

Additional Information

- **REQUIRED** for all patient contacts
- If base contact is not attempted, enter the three-letter code MTP

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PROTOCOL

Definition

Four- or five-digit code of the Medical Treatment Protocol (MTP) utilized to treat the patient

Field Values

1201	Assessment		
General Medical			
1202	General Medical	1202-P	General Medical (Pediatric)
1203	Diabetic Emergencies	1203-P	Diabetic Emergencies (Pediatric)
1204	Fever/Sepsis	1204-P	Fever/Sepsis (Pediatric)
1205	GI/GU Emergencies	1205-P	GI/GU Emergencies (Pediatric)
1206	Medical Device Malfunction	1206-P	Medical Device Malfunction (Pediatric)
1207	Shock/Hypotension	1207-P	Shock/Hypotension (Pediatric)
Behavioral			
1208	Agitated Delirium	1208-P	Agitated Delirium (Pediatric)
1209	Behavioral/Psychiatric Crisis	1209-P	Behavioral/Psychiatric Crisis (Pediatric)
Cardiovascular/Chest Pain			
1210	Cardiac Arrest	1210-P	Cardiac Arrest (Pediatric)
1211	Cardiac Chest Pain		
1212	Cardiac Dysrhythmia-Bradycardia	1212-P	Cardiac Dysrhythmia-Bradycardia (Pediatric)
1213	Cardiac Dysrhythmia-Tachycardia	1213-P	Cardiac Dysrhythmia-Tachycardia (Pediatric)
1214	Pulmonary Edema/CHF		
Childbirth/Pregnancy			
1215	Childbirth (Mother)	1215-P	Childbirth (Mother) (Pediatric)
		1216-P	Newborn/Neonatal Resuscitation (Pediatric)
1217	Pregnancy Complication	1217-P	Pregnancy Complication (Pediatric)
1218	Pregnancy/Labor	1218-P	Pregnancy/Labor (Pediatric)
Environmental			
1219	Allergy	1219-P	Allergy (Pediatric)
1220	Burns	1220-P	Burns (Pediatric)
1221	Electrocution	1221-P	Electrocution (Pediatric)
1222	Hyperthermia (Environmental)	1222-P	Hyperthermia (Environmental) (Pediatric)
1223	Hypothermia/Cold Injury	1223-P	Hypothermia/Cold Injury (Pediatric)
1224	Stings/Venomous Bites	1224-P	Stings/Venomous Bites (Pediatric)
1225	Submersion	1225-P	Submersion (Pediatric)
ENT Emergencies			
1226	ENT/Dental Emergencies	1226-P	ENT/Dental Emergencies (Pediatric)
1228	Eye Problem	1228-P	Eye Problem (Pediatric)
Neurology			
1229	ALOC	1229-P	ALOC (Pediatric)
1230	Dizziness/Vertigo	1230-P	Dizziness/Vertigo (Pediatric)
1231	Seizure	1231-P	Seizure (Pediatric)
1232	Stroke/CVA/TIA	1232-P	Stroke/CVA/TIA (Pediatric)
1233	Syncope/Near Syncope	1233-P	Syncope/Near Syncope (Pediatric)
Respiratory			
1234	Airway Obstruction	1234-P	Airway Obstruction (Pediatric)
		1235-P	BRUE (Pediatric)
1236	Inhalation Injury	1236-P	Inhalation Injury (Pediatric)
1237	Respiratory Distress	1237-P	Respiratory Distress (Pediatric)

Toxicology			
1238	Carbon Monoxide Exposure	1238-P	Carbon Monoxide Exposure (Pediatric)
1239	Dystonic Reaction	1239-P	Dystonic Reaction (Pediatric)
1240	HazMat	1240-P	HazMat (Pediatric)
1241	Overdose/Poisoning/Ingestion	1241-P	Overdose/Poisoning/Ingestion (Pediatric)
Trauma			
1242	Crush Injury/Syndrome	1242-P	Crush Injury/Syndrome (Pediatric)
1243	Traumatic Arrest	1243-P	Traumatic Arrest (Pediatric)
1244	Traumatic Injury	1244-P	Traumatic Injury (Pediatric)

Additional Information

- **REQUIRED** for all patient contacts
- More than one protocol can be used, do not list the same protocol number more than once
- Protocol(s) identified must correlate to the provider impression

Uses

- Allows for data sorting and tracking by protocol
- Assists with determination of appropriate treatment
- System evaluation and monitoring
- Epidemiological statistics

Data Source Hierarchy

- EMS Provider

REC FAC

Definition

The three-letter code of the facility to which the patient was transported

Field Values

LOS ANGELES COUNTY 9-1-1 RECEIVING			
ACH	Alhambra Hospital Medical Center	LBM	MemorialCare Long Beach Medical Center
AHM	Catalina Island Medical Center	LCH	Palmdale Regional Medical Center
AMH	Methodist Hospital of Southern California	LCM	Providence Little Co. of Mary M.C. - Torrance
AVH	Antelope Valley Hospital	MCP	Mission Community Hospital
BEV	Beverly Hospital	MHG	Memorial Hospital of Gardena
BMC	Southern California Hospital at Culver City	MID	Olympia Medical Center
CAL	Dignity Health - California Hospital Medical Center	MLK	Martin Luther King Jr. Community Hospital
CHH	Children's Hospital Los Angeles	MPH	Monterey Park Hospital
CHP	Community Hospital of Huntington Park	NOR	LA Community Hospital at Norwalk
CNT	Centinela Hospital Medical Center	NRH	Dignity Health - Northridge Hospital Medical Center
CPM	Coast Plaza Hospital	OVM	LAC Olive View-UCLA Medical Center
CSM	Cedars-Sinai Medical Center	PAC	Pacifica Hospital of the Valley
DCH	PIH Health Hospital - Downey	PIH	PIH Health Hospital- Whittier
DFM	Marina Del Rey Hospital	PLB	College Medical Center
DHL	Lakewood Regional Medical Center	PVC	Pomona Valley Hospital Medical Center
ELA	East Los Angeles Doctors Hospital	QOA	Hollywood Presbyterian Medical Center
ENH	Encino Hospital Medical Center	QVH	Emanate Health Queen of the Valley Hospital
FPH	Emanate Health Foothill Presbyterian Hospital	SDC	San Dimas Community Hospital
GAR	Garfield Medical Center	SFM	St. Francis Medical Center
GEM	Greater El Monte Community Hospital	SGC	San Gabriel Valley Medical Center
GMH	Dignity Health - Glendale Memorial Hospital and Health Center	SJH	Providence Saint John's Health Center
GSH	Good Samaritan Hospital	SJS	Providence Saint Joseph Medical Center
GWT	Adventist Health - Glendale	SMH	Santa Monica-UCLA Medical Center
HCH	Providence Holy Cross Medical Center	SMM	Dignity Health - St. Mary Medical Center
HGH	LAC Harbor-UCLA Medical Center	SOC	Sherman Oaks Hospital
HMH	Huntington Hospital	SPP	Providence Little Co. of Mary M.C. - San Pedro
HMN	Henry Mayo Newhall Hospital	SVH	Saint Vincent Medical Center
HWH	West Hills Hospital & Medical Center	TOR	Torrance Memorial Medical Center
ICH	Emanate Health Inter-Community Hospital	TRM	Providence Tarzana Medical Center
KFA	Kaiser Foundation Hospital – Baldwin Park	UCL	Ronald Reagan UCLA Medical Center
KFB	Kaiser Foundation Hospital – Downey	USC	LAC+USC Medical Center
KFH	Kaiser Foundation Hospital – South Bay	VHH	USC Verdugo Hills Hospital
KFL	Kaiser Foundation Hospital – Sunset (Los Angeles)	VPH	Valley Presbyterian Hospital
KFO	Kaiser Foundation Hospital – Woodland Hills	WHH	Whittier Hospital Medical Center
KFP	Kaiser Foundation Hospital – Panorama City	WMH	Adventist Health - White Memorial
KFW	Kaiser Foundation Hospital – West Los Angeles		

ORANGE COUNTY 9-1-1 RECEIVING			
ANH	Anaheim Regional Medical Center	LPI	La Palma Intercommunity Hospital
CHO	Children's Hospital of Orange County	PLH	Placentia Linda Hospital
FHP	Fountain Valley Regional Hospital and Medical Center	SJD	St. Jude Medical Center
KHA	Kaiser Foundation Hospital – Anaheim	UCI	UCI Medical Center
KFI	Kaiser Foundation Hospital – Irvine	WMC	Western Medical Center Santa Ana
LAG	Los Alamitos Medical Center		
SAN BERNARDINO COUNTY 9-1-1 RECEIVING			
ARM	Arrowhead Regional Medical Center	KFN	Kaiser Foundation Hospital - Ontario
CHI	Chino Valley Medical Center	LLU	Loma Linda University Medical Center
DHM	Montclair Hospital Medical Center	SAC	San Antonio Community Hospital
KFF	Kaiser Foundation Hospital - Fontana		
OTHER COUNTY 9-1-1 RECEIVING			
LRR	Los Robles Hospital & Med Ctr (Ventura)	SJO	St. John Regional Medical Center (Ventura)
SIM	Simi Valley Hospital (Ventura)	RCC	Ridgecrest Regional Hospital (Kern)
NON-BASIC HOSPITALS			
LBV	Long Beach VA	WVA	Wadsworth VA Medical Center

DISASTER RECEIVING FACILITIES ONLY			
BRH	Barlow Respiratory Hospital	NCH	USC Kenneth Norris Jr. Cancer Center
COA	Silver Lake Medical Center	PAM	Pacific Alliance Medical Center
COH	City of Hope National Medical Center	RLA	LAC-Rancho Los Amigos
LAC	Los Angeles Community Hospital – Olympic	TEM	Temple Community Hospital
HOL	Southern California Hospital at Hollywood	USH	Keck Hospital of USC
KMC	Kern Medical Center		

Additional Information

- Receiving facility codes are found on the back of the yellow copy

Uses

- System evaluation and monitoring
- Epidemiological statistics

Data Source Hierarchy

- EMS provider

NOTIFICATION?

Definition

Checkbox indicating whether the base or receiving hospital was notified prior to the patient's arrival

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- The base hospital is responsible for notifying the receiving hospital of an incoming patient so if base contact was made, notification should be marked as "Yes"

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

CODE 3?

Definition

Checkbox indicating whether the patient was transported to the receiving facility Code 3

Field Values

- **Y:** Yes
- **N:** No

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

VIA

Definition

Checkbox indicating the type of transport unit used

Field Values

- **ALS:** ALS monitoring or interventions are required during transport; at least one paramedic has to be on board during transport
- **BLS:** No ALS monitoring or interventions are required during transport; patient transported by EMS personnel only
- **Helicopter**
- **No Transport:** Patient was not transported (must indicate reason for no transport in the Comments Section)

Additional Information

- If field value is “A”, “B”, or “H” then a receiving facility and destination (“Trans To”) must be documented
- If the patient signed out AMA, the “AMA” box should also be checked

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TRANS TO

Definition

Checkbox indicating the actual destination of the patient

Field Values

- **MAR:** Most Accessible Receiving facility (licensed basic emergency department) that can be reached in the shortest amount of time. Depending on traffic and geography, this may not necessarily be the closest facility.
- **EDAP:** Most accessible Emergency Department Approved for Pediatrics approved to receive patients of less than or equal to 14 years of age
- **TC/PTC:** Most accessible Trauma Center approved to receive critically injured patients or most accessible Pediatric Trauma Center approved to receive critically injured pediatric patients less than or equal to 14 years of age
- **PMC:** Most accessible Pediatric Medical Center approved to receive critically ill pediatric patients of less than or equal to 14 years of age
- **STEMI:** Most accessible ST-Elevation Myocardial Infarction (STEMI) Receiving Center approved to receive patients with a suspected STEMI, or who have Return of Spontaneous Circulation (ROSC) following a non-traumatic cardiac arrest
- **PrimArY Stroke Center:** Most accessible Primary Stroke Center approved to receive suspected stroke patients or patients with a positive mLAPSS exam and a LAMS score <4
- **Comprehensive StroKe Center:** Most accessible Comprehensive Stroke Center approved to receive patients with a positive mLAPSS exam and a LAMS score ≥ 4
- **PeriNatal:** Most accessible Perinatal Center approved to receive patients greater than or equal to 20 weeks pregnant
- **SART:** Most accessible Sexual Assault Response Team facility approved to receive actual or suspected victims of sexual assault/abuse
- **Other:** Licensed basic emergency department that may also appropriately receive the patient in addition to those listed above. Most frequently used when the closest facility is inaccessible (e.g., is requesting diversion.) The reason for using “Other” as a destination must be documented in the “Reason” section

Additional Information

- If patient was transported then a ‘Via’ and receiving facility value must be documented

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

REASON

Definition

Checkboxes indicating the reason that the patient was transported to a facility other than the most accessible receiving facility or specialty center

Field Values

- **No SC Required:** Patient does not meet criteria, requirements, or guidelines for transport to a specialty center
- **Criteria/Required:** Patient meets criteria or requirements for transport to a specialty center (EDAP, TC/PTC, or SRC)
- **Guidelines:** Patient meets guidelines for transport to a specialty center (TC/PTC, Perinatal, PMC, ASC, CSC, or SART)
- **Judgment (Provider/Base):** Patient does not meet specialty center criteria, requirements, or guidelines, but is transported to a specialty center based on Base or the Provider judgment; or, meets, but is not transported to a specialty center
- **EXtremis:** Patient is transported to the most accessible receiving facility because the severity of the injury/illness precludes transport to a specialty center (e.g. unmanageable airways, cardiopulmonary arrest (excluding traumatic penetrating torso injuries), etc.)
- **ED Saturation:** Most accessible receiving facility or EDAP has requested diversion due to emergency department saturation
- **No SC Access:** Specialty center not accessible due to transport time constraints or geography
- **Request by:** Patient is transported to a facility other than the most accessible receiving facility or specialty center by request from the patient, a family member, patient's private medical doctor (PMD), or other authorized person

Uses

- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

AMA?

Definition

Checkbox indicating whether the patient refused transport and signed out against medical advice

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- A patient refusing treatment or transport must sign the release on the back of the first page of the EMS Report Form
- If patients meet the conditions for “Release at Scene” or “Treat and Refer”, the patient does not have to sign a release and ‘AMA?’ should = “No”

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

RELEASE AT SCENE?

Definition

Checkbox indicating whether the patient, after assessment by EMS personnel, is found to not have an emergency medical condition and does not appear to require immediate treatment and/or transportation

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- If 'AMA?'= "Yes", 'Release at Scene?' should = "No"

Data Source Hierarchy

- EMS provider

TREAT & REFER?

Definition

Checkbox indicating whether the patient, after assessment by EMS personnel, is found to not have an ongoing emergency medical condition, not require transport to the emergency department for evaluation, and is stable for referral to the patient's regular healthcare provider, doctor's office, or clinic

Field Values

- **Y** Yes
- **N** No

Additional Information

- If 'AMA?' = "Yes", 'Treat & Refer?' should = "No"

Data Source Hierarchy

- EMS provider

PATIENT INFORMATION

LAST NAME

Definition

The patient's last name

Field Values

- Free text

Additional Information

- If Run Type=R , then the patient's last name must be documented

Uses

- Patient identification
- Link between other databases

Data Source Hierarchy

- Patient
- Family member
- Caretaker

FIRST NAME

Definition

The patient's first name

Field Values

- Free text

Additional Information

- If Run Type=R , then the patient's first name must be documented

Uses

- Patient identification
- Link between other databases

Data Source Hierarchy

- Patient
- Family member
- Caretaker

MI

Definition

The first letter of the patient's middle name

Field Values

- Free text

Uses

- Patient identification
- Link between other databases

Data Source Hierarchy

- Patient
- Family member
- Caretaker

DOB

Definition

The patient's date of birth

Field Values

- Collected as MMDDYYYY

Additional Information

- Year must be after 1900

Uses

- Patient identification
- Link between other databases

Data Source Hierarchy

- Patient
- Family member
- Caretaker

PHONE

Definition

The patient's primary telephone number

Field Values

- Free text

Additional Information

- An area code is needed for all phone numbers

Uses

- Patient identification

Data Source Hierarchy

- Patient
- Family member
- Caretaker

STREET NUMBER

Definition

The street number of the patient's primary residence

Field Values

- Free text

Uses

- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider
- 9-1-1 or Dispatch Center

STREET NAME

Definition

The name of the street of the patient's primary residence

Field Values

- Free text

Uses

- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider
- 9-1-1 or Dispatch Center

APT

Definition

The apartment number of the patient's primary residence

Field Values

- Free text

Uses

- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider
- 9-1-1 or Dispatch Center

CITY

Definition

The city code of the patient's primary residence

Field Values

AA	Arleta	CO	Commerce	HO	Hollywood
AC	Acton	CP	Canoga Park	HP	Huntington Park
AD	Altadena	CR	Crenshaw	HR	Harbor City
AE	Arlington Heights	CS	Castaic	HV	Hi Vista
AG	Agua Dulce	CT	Century City	HY	Hyde Park
AH	Agoura Hills	CU	Cudahy	IG	Inglewood
AL	Alhambra	CV	Covina	IN	City of Industry
AN	Athens	CY	Cypress Park	IR	Irwindale
AO	Avocado Heights	DB	Diamond Bar	JH	Juniper Hills
AR	Arcadia	DO	Downey	JP	Jefferson Park
AT	Artesia	DS	Del Sur	KG	Kagel Canyon
AV	Avalon	DU	Duarte	KO	Koreatown
AW	Atwater Village	DZ	Dominguez	LA	Los Angeles
AZ	Azusa	EL	East Los Angeles	LB	Long Beach
BA	Bel Air Estates	EM	El Monte	LC	La Canada Flintridge
BC	Bell Canyon	EN	Encino	LD	Ladera Heights
BE	Bellflower	EO	El Sereno	LE	Leona Valley
BG	Bell Gardens	EP	Echo Park	LF	Los Feliz
BH	Beverly Hills	ER	Eagle Rock	LH	La Habra Heights
BK	Bixby Knolls	ES	El Segundo	LI	Little Rock
BL	Bell	EV	Elysian Valley	LK	Lakewood
BN	Baldwin Hills	EZ	East Rancho Dominguez	LL	Lake Los Angeles
BO	Bouquet Canyon	FA	Fairmont	LM	La Mirada
BP	Baldwin Park	FL	Florence County	LN	Lawndale
BR	Bradbury	FO	Fair Oaks Ranch	LO	Lomita
BS	Belmont Shore	GA	Gardena	LP	La Puente
BT	Bassett	GF	Griffith Park	LQ	LAX
BU	Burbank	GH	Granada Hills	LR	La Crescenta
BV	Beverly Glen	GK	Glenoaks	LS	Los Nietos
BW	Brentwood	GL	Glendale	LT	Lancaster
BX	Box Canyon	GO	Gorman	LU	Lake Hughes
BY	Boyle Heights	GP	Glassell Park	LV	La Verne
BZ	Byzantine-Latino Quarter	GR	Green Valley	LW	Lake View Terrace
CA	Carson	GV	Glenview	LX	Lennox
CB	Calabasas	GW	Glendora	LY	Lynwood
CC	Culver City	HA	Hawthorne	LZ	Lake Elizabeth
CE	Cerritos	HB	Hermosa Beach	MA	Malibu
CH	Chatsworth	HC	Hacienda Heights	MB	Manhattan Beach
CI	Chinatown	HE	Harvard Heights	MC	Malibu Beach
CK	Charter Oak	HG	Hawaiian Gardens	MD	Marina Del Rey
CL	Claremont	HH	Hidden Hills	ME	Monte Nido
CM	Compton	HI	Highland Park	MG	Montecito Heights
CN	Canyon Country	HK	Holly Park	MH	Mission Hills

MI	Mint Canyon	RB	Redondo Beach	TD	Tropico
ML	Malibu Lake	RC	Roosevelt Corner	TE	Topanga State Park
MM	Miracle Mile	RD	Rancho Dominguez	TH	Thousand Oaks
MN	Montrose	RE	Rolling Hills Estates	TI	Terminal Island
MO	Montebello	RH	Rolling Hills	TJ	Tujunga
MP	Monterey Park	RK	Rancho Park	TL	Toluca Lake
MR	Mar Vista	RM	Rosemead	TO	Torrance
MS	Mount Wilson	RO	Rowland Heights	TP	Topanga
MT	Montclair	RP	Rancho Palos Verdes	TR	Three Points
MU	Mount Olympus	RS	Reseda	TT	Toluca Terrace
MV	Monrovia	RV	Rampart Village	UC	Universal City
MW	Maywood	RW	Rosewood	UP	University Park
MY	Metler Valley	SA	Saugus	VA	Valencia
NA	Naples	SB	Sandberg	VC	Venice
NE	Newhall	SC	Santa Clara	VE	Vernon
NH	North Hollywood	SD	San Dimas	VG	Valley Glen
NN	Neenach	SE	South El Monte	VI	Valley Village
NO	Norwalk	SF	San Fernando	VL	Valinda
NR	Northridge	SG	San Gabriel	VN	Van Nuys
NT	North Hills	SH	Signal Hill	VV	Val Verde
OP	Ocean Park	SI	Sierra Madre	VW	View Park
OT	Other	SJ	Silver Lake	VY	Valyermo
PA	Pasadena	SK	Sherman Oaks	WA	Walnut
PB	Pearblossom	SL	Sun Valley	WB	Willowbrook
PC	Pacoima	SM	Santa Monica	WC	West Covina
PD	Palmdale	SN	San Marino	WE	West Hills
PE	Pacific Palisades	SO	South Gate	WG	Wilsona Gardens
PH	Pacific Highlands	SP	South Pasadena	WH	West Hollywood
PI	Phillips Ranch	SQ	Sleepy Valley	WI	Whittier
PL	Playa Vista	SR	San Pedro	WK	Winnetka
PM	Paramount	SS	Santa Fe Springs	WL	Woodland Hills
PN	Panorama City	ST	Santa Clarita	WM	Wilmington
PO	Pomona	SU	Sunland	WN	Windsor Hills
PP	Palos Verdes Peninsula	SV	Stevenson Ranch	WO	Westlake
PR	Pico Rivera	SW	Sawtelle	WP	Walnut Park
PS	Palms	SX	South Central County	WR	Westchester
PT	Porter Ranch	SY	Sylmar	WS	Windsor Square
PV	Palos Verdes Estates	SZ	Studio City	WT	Watts
PY	Playa Del Rey	TA	Tarzana	WV	Westlake Village
QH	Quartz Hill	TC	Temple City	WW	Westwood

Uses

- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider
- 9-1-1 or Dispatch Center

PATIENT STATE

Definition

The state of the patient's primary residence

Field Values

AK	Alaska	KS	Kansas	NM	New Mexico	WI	Wisconsin
AL	Alabama	KY	Kentucky	NV	Nevada	WV	West Virginia
AR	Arkansas	LA	Louisiana	NY	New York	WY	Wyoming
AZ	Arizona	MA	Massachusetts	OH	Ohio	AS	American Samoa
CA	California	MD	Maryland	OK	Oklahoma	FM	Federated States of Micronesia
CO	Colorado	ME	Maine	OR	Oregon	GU	Guam
CT	Connecticut	MI	Michigan	PA	Pennsylvania	MH	Marshall Islands
DC	District of Columbia	MN	Minnesota	RI	Rhode Island	MP	Northern Mariana Islands
DE	Delaware	MO	Missouri	SC	South Carolina	PR	Puerto Rico
FL	Florida	MS	Mississippi	SD	South Dakota	PW	Palau
GA	Georgia	MT	Montana	TN	Tennessee	UM	US Minor Outlying Islands
HI	Hawaii	NC	North Carolina	TX	Texas	VI	Virgin Islands of the US
IA	Iowa	NH	New Hampshire	UT	Utah	OT	Other
ID	Idaho	ND	North Dakota	VA	Virginia		
IL	Illinois	NE	Nebraska	VT	Vermont		
IN	Indiana	NJ	New Jersey	WA	Washington		

Uses

- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider

PATIENT ZIP CODE

Definition

The zip code of the patient's primary residence

Field Values

- Five-digit numeric value

Uses

- Epidemiological statistics

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- EMS Provider
- 9-1-1 or Dispatch Center

MILEAGE

Definition

Total mileage traveled from the incident to the receiving facility

Field Values

- Numeric values only

Additional Information

- Document according to your Agency's policy
- For billing purposes only

Uses

- Billing purposes

Data Source Hierarchy

- Internet based mapping program
- Auto-generated by the EMS provider's electronic capture device

INSURANCE

Definition

The patient's insurance company, if applicable

Field Values

- Free text

Additional Information

- Document according to your Agency's policy
- For billing purposes only

Uses

- Billing purposes

Data Source Hierarchy

- Patient

HOSP. VISIT

Definition

The visit, or encounter, number that relates to the patient's current hospital visit

Field Values

- Free text

Uses

- Patient identification
- Link between other databases

Data Source Hierarchy

- Hospital Face Sheet

PMD NAME

Definition

The name of the patient's private medical doctor (PMD), if known

Field Values

- Free text

Additional Information

- Document according to your Agency's policy

Data Source Hierarchy

- Patient

PARTIAL SS # (LAST 4 DIGITS)

Definition

The last four digits of the patient's social security number

Field Values

- Numeric values only

Additional Information

- Document according to your Agency's policy

Uses

- Billing purposes

Data Source Hierarchy

- Patient

COMMENTS

COMMENT SECTION

Definition

Area of form used to document critical run information that is not covered in other sections of the EMS Report Form

Field Values

- Free text

Additional Information

- Write a legible, brief but thorough summary of run
- List pertinent points and findings, including all unusual circumstances that affect patient care
- Use appropriate abbreviations only
- Use to provide a complete scene description, including time needed to secure the scene, approximate speed and/or damage to the vehicle, and distance of the fall and onto what type of surface
- Use to describe why no medical intervention was needed or reasons for an incomplete report or vital signs (BP cuff too small/large for patient's arm, etc.)
- State facts, avoid conclusions or inflammatory statements
- Expand on response to treatment, change in patient status, and information concerning restraints
- Use a Page 2 for runs requiring more space for additional medications, treatments, vitals, and/or comments

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

O/P,Q,R,S,T

Definition

Acronym used as a tool to assess and document the following symptom attributes:

- O/P: Onset/Provocation
- Q: Quality
- R: Region/Radiation/Relief
- S: Severity
- T: Time

Field Values

- Free text

Uses

- Prompts thorough assessment and documentation of patient's symptoms
- Assists with determination of appropriate treatment and transport

Data Source Hierarchy

- EMS provider

HX

Definition

Space to indicate previous medical problem(s) experienced by the patient, if applicable

Field Values

- Free text

Uses

- Prompts thorough assessment and documentation of patient's symptoms
- Assists with determination of appropriate treatment and transport

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- PMD

ALLERGIES

Definition

Checkbox and space to indicate patient history of adverse reactions or allergies to medications or other substances, if applicable

Field Values

- Free text

Additional Information

- Allergies to non-medication items may be listed if they are related to the current problem or potential treatments (e.g., adhesive tape, or latex)

Uses

- Patient safety

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- PMD

ALLERGIC TO ASA?

Definition

Indicates whether or not the patient is allergic to aspirin

Field Values

- **Y:** Yes
- **N:** No

Uses

- Assists with documentation of State EMS Core Measure regarding aspirin administration in patients 35 ≥ years of age who have a complaint of chest pain

Data Source Hierarchy

- EMS Provider

MEDS

Definition

Space to indicate medications currently being taken by the patient, if applicable

Field Values

- Free text

Additional Information

- Indicate patient compliance, if applicable
- Include nonprescription drugs and herbal supplements

Uses

- Assists with determination of appropriate treatment and transport

Data Source Hierarchy

- Patient
- Family member
- Caretaker
- PMD

SEDs IN PAST 48 HRS

Definition

Checkboxes indicating whether the patient has used sexually enhancing drugs (SEDs) within the past 48 hours

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- Use of SEDs must be assessed prior to administering nitroglycerin to any patient

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caretaker

SUSPECTED ETOH?

Definition

Checkbox indicating that statements by the patient, family, or bystanders and/or the situation and behavior suggest the patient has ingested alcohol

Field Values

- **Y:** Yes
- **N:** No

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver
- EMS provider
- Bystander

SUSPECTED DRUG USE?

Definition

Checkbox indicating that statements by the patient, family, or bystanders and/or the situation and behavior suggest the patient has used drugs

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- If drug use is suspected, attempt to ascertain the type of drug used and the route, if possible

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family
- Bystanders
- EMS Provider

IF YES:

Definition

Checkboxes indicating what drug(s) the patient used

Field Values

- **AMP:** Amphetamines
- **HER:** Heroin
- **COC:** Cocaine
- **THC:** Cannabis
- **OOP:** Other Opioid
- **OTH:** Other

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- Epidemiological statistics
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family
- Bystanders
- EMS Provider

ROUTE

Definition

Checkbox indicating what route the patient utilized to administer the drug(s)

Field Values

- **INJ:** Injected
- **ING:** Ingested
- **INH:** Inhaled
- **OTH:** Other

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- Epidemiological statistics
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family
- Bystanders
- EMS Provider

PHYSICAL SIGNS

PUPILS

Definition

Checkboxes indicating the findings from assessment of the patient's initial pupillary response to light

Field Values

- **PERL:** Pupils are equal in size and react to light
- **Pinpoint:** Pupils are extremely constricted
- **Sluggish:** Pupils react to light slower than normal
- **Fixed/Dilated:** Pupils are dilated and do not react to light
- **Cataracts:** Cataracts in one or both eyes interfere with pupil exam
- **Unequal:** Pupils are unequal in size
- **Pt's Norm:** Pupils are normal in size and reaction for patient

Additional Information

- If a value of "N" is documented, another value must also be entered, for example "S"

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

RESP

Definition

Checkboxes indicating findings from initial assessment of the patient's respiratory system

Field Values

- **Normal rate/effort:** Breathing appears effortless and rate is within normal limits for patient
- **Clear:** No abnormal sounds are heard on auscultation
- **Wheezes:** Coarse, whistling sound heard on auscultation, associated with inspiration and/or expiration
- **RH**onchi: Coarse, rattling or snoring sound heard on auscultation, associated with inspiration and/or expiration
- **Unequal:** Chest rise or breath sounds diminished on one side
- **Stridor:** High-pitched, audible wheezing sound associated with inspiration and/or expiration
- **R**ales: Rattling or crackling noises heard on auscultation, associated with inspiration
- **SnorinG:** Prolonged snorting sound/soft palate vibration that is audible during inspiration
- **JVD:** Distended jugular veins are observed in the supine patient
- **Accessory Muscle Use (AMU):** Patient is using additional muscles to assist with difficulty breathing, such as those of the neck, shoulders, or abdomen
- **Labored:** Breathing appears to be difficult or requires extra effort
- **Apnea:** Patient is not breathing or stops breathing for periods of time
- **Tidal Volume:**
 - **N:** Normal depth of inspiration is observed
 - **+**: Increased depth of inspiration is observed
 - **-:** Decreased depth of inspiration is observed

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

SKIN

Definition

Checkboxes indicating findings from assessment of the patient's initial skin signs

Field Values

- **Normal:** All aspects of skin assessment (color, temperature, moisture, and appearance) are normal
- **Cyanotic:** Skin or lips appear blue
- **Flushed:** Skin appears red
- **Hot:** Skin feels warmer than normal or hot to touch
- **CoLd:** Skin feels cool or cold to touch
- **Pale:** Skin appears abnormally pale, ashen, or gray
- **Diaphoretic:** Skin is sweaty or moist to touch
- **Cap Refill NoRmal:** Capillary refill is less than or equal to 2 seconds
- **Cap Refill DElayed:** Capillary refill is greater than 2 seconds

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS Provider

FIRST 12 LEAD TIME

Definition

Time of day the first 12-lead ECG was performed

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- **REQUIRED** for all patients on whom a 12-lead ECG is performed
- If an ECG indicating STEMI is obtained by a clinic, doctor's office, or transferring hospital, enter the 12-lead time from the STEMI ECG in this field
- **Do not** perform another 12-lead ECG if the clinic, doctor's office, or transferring hospital already has performed a 12-lead ECG indicating STEMI

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

EMS INTERPRETATION

Definition

Checkbox indicating the EMS personnel's interpretation of the first 12-lead ECG

Field Values

- **Normal**: EMS personnel interpretation indicates ECG is normal
- **ABnormal**: EMS personnel interpretation indicates ECG is abnormal
- **STEMI**: EMS personnel interpretation indicates an ST-Elevation Myocardial Infarction, or manufacturer's equivalent

Additional Information

- **REQUIRED** for all patients on whom a 12-lead ECG is performed
- If EMS personnel interpretation indicates an ST-Elevation Myocardial Infarction (or manufacturer's equivalent) the patient should be transported to the nearest available STEMI Receiving Center (SRC)
- If an ECG indicating STEMI is obtained by a clinic, doctor's office, or transferring hospital, **do not** repeat the 12-lead ECG
- Every 12-lead ECG should be evaluated by EMS personnel, regardless of whether the ECG was performed by a clinic, doctor's office, transferring hospital, or EMS personnel

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SOFTWARE INTERPRETATION

Definition

Checkbox indicating the software's interpretation of the first 12-lead ECG

Field Values

- **Normal**: Electronic interpretation indicates ECG is normal
- **Abnormal**: Electronic interpretation indicates ECG is abnormal
- **STEMI**: Electronic interpretation indicates an ST-Elevation Myocardial Infarction, or manufacturer's equivalent

Additional Information

- **REQUIRED** for all patients on whom a 12-lead ECG is performed
- If electronic interpretation indicates an ST-Elevation Myocardial Infarction (or manufacturer's equivalent) the patient should be transported to the nearest available STEMI Receiving Center (SRC)
- If an ECG indicating STEMI is obtained by a clinic, doctor's office, or transferring hospital, check the STEMI box in this field

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

ARTIFACT

Definition

Checkbox indicating whether artifact is observed on the first 12-lead ECG tracing

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 12-lead ECG is performed where either the software or EMS interpretation indicates STEMI
- Electronic artifact interferes with accurate ECG interpretation and may indicate need to repeat ECG

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

WAVY BASELINE

Definition

Checkbox indicating whether the baseline of the first 12-lead ECG tracing moves with respiration

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 12-lead ECG is performed where either the software or EMS interpretation indicates STEMI
- Wavy baseline can interfere with accurate ECG interpretation and may indicate need to reposition leads and repeat ECG

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

PACED RHYTHM

Definition

Checkbox indicating presence of a pacemaker-generated rhythm on the first 12-lead ECG tracing

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 12-lead ECG is performed where either the software or EMS interpretation indicates STEMI
- Pacemakers can interfere with accurate ECG interpretation and must be reported

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

TRANSMITTED?

Definition

Checkbox indicating whether the first 12-lead performed was transmitted to the receiving facility

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 12-lead ECG is performed

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SECOND 12 LEAD TIME

Definition

Time of day the second 12-lead ECG was performed, if applicable

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- **REQUIRED** for all patients on whom a 2nd 12-lead ECG is performed
- If an ECG indicating STEMI is obtained by a clinic, doctor's office, or transferring hospital, enter the 12-lead time from the STEMI ECG in this field
- **Do not** perform another 12-lead ECG if the clinic, doctor's office, or transferring hospital already has performed a 12-lead ECG indicating STEMI

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

EMS INTERPRETATION

Definition

Checkbox indicating the EMS personnel's interpretation of the second 12-lead ECG

Field Values

- **Normal**: EMS personnel interpretation indicates ECG is normal
- **Abnormal**: EMS personnel interpretation indicates ECG is abnormal
- **STEMI**: EMS personnel interpretation indicates an ST-Elevation Myocardial Infarction, or manufacturer's equivalent

Additional Information

- **REQUIRED** for all patients on whom a 2nd 12-lead ECG is performed
- If EMS personnel interpretation indicates an ST-Elevation Myocardial Infarction (or manufacturer's equivalent) the patient should be transported to the nearest available STEMI Receiving Center (SRC)
- If an ECG indicating STEMI is obtained by a clinic, doctor's office, or transferring hospital, **do not** repeat the 12-lead ECG
- Every 12-lead ECG should be evaluated by EMS personnel, regardless of whether the ECG was performed by a clinic, doctor's office, transferring hospital, or EMS personnel

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SOFTWARE INTERPRETATION

Definition

Checkbox indicating the software's interpretation of the second 12-lead ECG

Field Values

- **Normal**: Electronic interpretation indicates ECG is normal
- **Abnormal**: Electronic interpretation indicates ECG is abnormal
- **STEMI**: Electronic interpretation indicates an ST-Elevation Myocardial Infarction, or manufacturer's equivalent

Additional Information

- **REQUIRED** for all patients on whom a 2nd 12-lead ECG is performed
- If electronic interpretation indicates an ST-Elevation Myocardial Infarction (or manufacturer's equivalent) the patient should be transported to the nearest available STEMI Receiving Center (SRC)
- If an ECG indicating STEMI is obtained by a clinic, doctor's office, or transferring hospital, check the STEMI box in this field

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

ARTIFACT

Definition

Checkbox indicating whether artifact is observed on the second 12-lead ECG tracing

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 2nd 12-lead ECG is performed where either the software or EMS interpretation indicates STEMI
- Electronic artifact interferes with accurate ECG interpretation and may indicate need to repeat ECG

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

WAVY BASELINE

Definition

Checkbox indicating whether the baseline of the second 12-lead ECG tracing moves with respiration

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 2nd 12-lead ECG is performed where either the software or EMS interpretation indicates STEMI
- Wavy baseline can interfere with accurate ECG interpretation and may indicate need to reposition leads and repeat ECG

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

PACED RHYTHM

Definition

Checkbox indicating presence of a pacemaker-generated rhythm on the second 12-lead ECG tracing

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 2nd 12-lead ECG is performed where either the software or EMS interpretation indicates STEMI
- Pacemakers can interfere with accurate ECG interpretation and must be reported

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- ECG strip

TRANSMITTED?

Definition

Checkbox indicating whether the second 12-lead performed was transmitted to the receiving facility, if applicable

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- **REQUIRED** for all patients on whom a 2nd 12-lead ECG is performed

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SPECIAL CIRCUMSTANCES

DNR/AHCD/POLST?

Definition

Checkbox indicating presence of a valid DNR, Advance Healthcare Directive (AHCD), or Physician Order for Life Sustaining Treatment (POLST) form for the patient

Field Values

- **Y:** Yes
- **N:** No

Uses

- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver
- EMS provider

POISON CONTROL CONTACTED?

Definition

Checkbox indicating whether poison control was contacted

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- Applies to poison control contact made by dispatch, EMS on scene, or family members prior to arrival of paramedics

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- 9-1-1 or Dispatch Center
- EMS provider
- Patient
- Family member
- Caregiver

SUSPECTED ABUSE/NEGLECT?

Definition

Checkbox indicating whether family violence, neglect or abuse is suspected

Field Values

- Y: Yes
- N: No

Additional Information

- Must be followed up with the appropriate reports per Los Angeles County Prehospital Care Manual Ref. No. 822, Suspected Child Abuse/Neglect Reporting Guidelines, and Ref. No. 823, Elder Abuse and Dependent Adult Abuse Reporting Guidelines
- Documentation of Agency reported to and confirmation/report number, should be documented in the Comments section

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Caregiver
- Family member
- EMS provider

CONTACTED MED. CIRC. SUPPORT?

Definition

Checkbox indicating whether the mechanical circulatory support (MCS) coordinator was contacted

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- Left ventricular assist device (LVAD) coordinators are the most common MCS coordinators contacted

Data Source Hierarchy

- EMS provider
- Patient
- Family member
- Caregiver

≥ 20 WKS IUP?

Definition

Checkbox indicating whether the patient is greater than or equal to twenty weeks of intrauterine pregnancy, if applicable

Field Values

- Y: Yes
- N: No

Additional Information

- Patients may only be able to provide the number of months, not weeks, of their pregnancy – in this case, pregnancies reported of greater than 4½ months can be assumed to be greater than 20 weeks
- Patients injured while pregnant meet trauma triage special considerations for transport to a trauma center

Uses

- Provides documentation of assessment
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver

_ WKS

Definition

Space indicating the number of weeks of intrauterine pregnancy, if applicable

Field Values

- Up to two-digit numeric value

Uses

- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver

BARRIERS TO PATIENT CARE

Definition

Specific barriers that may potentially impact patient care

Field Values

- **H:** Hearing
- **P:** Physical
- **L:** Language
- **S:** Speech
- **O:** Other

Uses

- Provides documentation of assessment
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- Patient
- Family member
- Caregiver
- EMS provider

CARDIAC ARREST

ARREST DETAILS

Definition

Checkboxes indicating the details of the cardiac arrest, such as: the person(s) who witnessed the cardiac arrest; who performed cardiopulmonary resuscitation; if EMS personnel or citizens used an AED; and if resuscitation efforts were initiated

Field Values

- **Witness Citizen:** Witnessed by a non-EMS person (e.g., law enforcement, nursing home personnel, bystanders, family, etc.)
- **Witness EMS:** Witnessed by EMS personnel
- **Witness None:** Not witnessed
- **Citizen CPR:** CPR was initiated by a non-EMS person (e.g., law enforcement, nursing home personnel, bystanders, family, etc.)
- **Citizen AED:** An AED was applied to the patient by a non-EMS person (e.g., law enforcement or nursing home personnel, bystanders, family, etc.)
- **EMS CPR @:** Time of day CPR was initiated by EMS personnel
- **Arrest to CPR:** Estimated time, in minutes, from the time of arrest to the time CPR is initiated
- **AED Analyze:** An AED is applied by EMS personnel and analyzed (no shocks administered)
- **AED Defibrillation:** An AED is applied by EMS personnel and one or more shocks are administered
- **ALS Resuscitation (use pg 2):** ALS resuscitation efforts are initiated or patient is pronounced dead by the base hospital physician; attach completed ALS Continuation Form
- **Resuscitation Discontinued:** Resuscitative measures are discontinued by EMS personnel
- **Restoration of Pulse:** The restoration of a spontaneous perfusing rhythm

Additional Information

- Mark all that apply

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

REASON FOR WITHHOLDING/TERMINATING RESUSCITATION

Definition

Checkboxes indicating reason(s) why EMS personnel withheld or terminated cardiopulmonary resuscitation

Field Values

- **DNR/AHCD/POLST:** A valid DNR, Advance Healthcare Directive (AHCD), or Physician Order for Life Sustaining Treatment (POLST) form is present
- **T.O.R.:** Resuscitative measures are terminated by EMS personnel
- **___ Time of 814 Death:** Time of day patient is determined to be dead per Los Angeles County Prehospital Care Manual Reference No. 814. Documented as HHMM using 24-hour clock
- **Rigor:** Rigor mortis is present
- **Lividity:** Post-mortem lividity is present
- **Blunt Trauma:** Mark for blunt trauma patients who, based on a paramedic's thorough patient assessment, are found apneic, pulseless, and without organized ECG activity (narrow complex supraventricular rhythm) upon the arrival of EMS personnel at the scene
- **OTher:** The patient is determined dead per Reference 814 due to a reason not listed above (decapitation, incineration, decomposition, etc.)
- **FAmily ___ (signature):** The signature of the family member who requested resuscitation be withheld

Additional Information

- Mark all that apply

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

VITAL SIGNS

TIME

Definition

Time of day the patient's vital signs are obtained

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TM

Definition

The number of the team member who obtained vital signs from the patient

Field Values

- Free text

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

BLOOD PRESSURE

Definition

Numeric values of the patient's systolic and/or diastolic blood pressure

Field Values

- Up to three-digit numeric value
- Documented as numeric systolic value / numeric diastolic value

Additional Information

- If the blood pressure is palpated or not reported, write "P" for the diastolic value- blood pressure should only be palpated when environmental or other extenuating factors makes it impossible to accurately auscultate

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PULSE

Definition

Numeric value of the patient's palpated pulse rate

Field Values

- Up to three-digit numeric value

Additional Information

- Measured in beats palpated per minute
- If cardiac monitor shows a rhythm that does not produce signs of perfusion, rate should be documented as "0"

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

RR

Definition

Numeric value of the patient's unassisted respiratory rate

Field Values

- Up to two-digit numeric value

Additional Information

- Measured in breaths per minute
- If patient requires mechanical assistance, then document the unassisted rate only, not the assisted rate

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

O2 SAT

Definition

Numeric value of the patient's oxygen saturation

Field Values

- Up to three-digit value from 0 to 100

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PAIN

Definition

Numeric value indicating the patient's subjective pain level

Field Values

0 No Pain	6 Moderate Pain
1 Some Discomfort	7 Moderate Pain
2 Some Discomfort	8 Severe Pain
3 Having Discomfort	9 Severe Pain
4 Having Discomfort	10 Most Severe Pain
5 Mild Pain	

Additional Information

- Pain level should be assessed and recorded with each set of vital signs, whenever trauma or pain is the chief complaint, a mechanism of injury exists, and before and after administration of pain medication
- When assessing non-verbal patients, the "Faces Pain Scale" may be used to obtain the corresponding numeric pain score
- The "Faces Pain Scale" assessment tool is on the back of the red copy

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

CO2

Definition

Numeric value indicating the subsequent concentration of carbon dioxide measured by the capnometer, if applicable

Field Values

- Up to two-digit value

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

MEDICATION/ DEFIBRILLATION

TIME

Definition

Time of day when medication or treatment was administered and/or when a subsequent 3-lead rhythm was read from the cardiac monitor

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- The exact time for each defibrillation/cardioversion, as well as the joules, must be noted separately

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TM

Definition

The number of the team member who administered medication or treatment to the patient and/or who read the subsequent 3-lead rhythm from the cardiac monitor

Field Values

- Free text

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

RHYTHM

Definition

Two- or three-letter code indicating the patient's subsequent rhythm(s) on the cardiac monitor, if applicable

Field Values

1HB First degree Heart Block	AFI Atrial Fibrillation
3HB Third degree Heart Block	AGO Agonal Rhythm
AFL Atrial Flutter	AVR Accelerated Ventricular Rhythm
ASY Asystole	JR Junctional Rhythm
IV Idioventricular Rhythm	PAC Premature Atrial Contraction
PAT Paroxysmal Atrial Tachycardia	PEA Pulseless Electrical Activity
PM Pacemaker Rhythm	PST Paroxysmal Supraventricular Tachycardia
PVC Premature Ventricular Contraction	SA Sinus Arrhythmia
SB Sinus Bradycardia	SR Sinus Rhythm
ST Sinus Tachycardia	SVT Supraventricular Tachycardia
VF Ventricular Fibrillation	VT Ventricular Tachycardia
2HB Second degree Heart Block	

Additional Information

- Cardiac rhythm should be assessed, and documented here any time a change is noted, or after any cardiac-related treatments
- ECG Codes are found on the back of the red copy

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

MEDS/DEFIB

Definition

The medication, defibrillation and/or cardioversion administered to the patient

Field Values

ADE Adenosine	P-EPI Push-dose Epinephrine
AED AED	FEN Fentanyl
ALB Nebulized Albuterol	GLP Oral Glucose Paste
AMI Amiodarone	GLU Glucagon
ASA Aspirin	IVU I.V. Unobtainable
ATR Atropine	LID Lidocaine
BEN Benadryl	MID Midazolam
BIC Sodium Bicarbonate	MORPHINE Morphine Sulfate
CAL Calcium Chloride	NAR Narcan
CAR Cardioversion	NS Normal Saline
COL Glucola	NTG Nitroglycerin Spray
D10 10% Dextrose	OND Ondansetron
DEF Defibrillation	SL Saline Lock
EPI Epinephrine	

Additional Information

- Each drug/defibrillation ordered should be written on a separate line so that dose and results can be clearly documented
- Medication/Defibrillation codes are found on the back of the red copy

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

DOSE

Definition

The medication dosage administered or the number of joules delivered during defibrillation/cardioversion

Field Values

- Up to three-digit positive numeric value

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

DOSE UNITS

Definition

The units of medication administered or the joules delivered during defibrillation/cardioversion

Field Values

- **gm:** grams
- **J:** joules
- **mcg:** micrograms
- **mEq:** milliequivalent
- **mg:** milligrams
- **mL:** milliliter

Data Source Hierarchy

- EMS provider

ROUTE

Definition

Two-letter code indicating the route of medication administration

Field Values

- **IV:** Intravenous
- **IO:** Intraosseous
- **SQ:** Subcutaneous
- **IM:** Intramuscular
- **PO:** By Mouth (per os) / oral disintegrating tablets (ODT)
- **IN:** Intranasal/Inhalation (e.g, HHN)
- **SL:** Sublingual

Additional Information

- Medication Route codes are found on the back of the red copy

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

RESULT

Definition

The effect the medication or treatment had on the patient

Field Values

0 No Pain	6 Moderate Pain
1 Some Discomfort	7 Moderate Pain
2 Some Discomfort	8 Severe Pain
3 Having Discomfort	9 Severe Pain
4 Having Discomfort	10 Most Severe Pain
5 Mild Pain	N No Change
- Deteriorated	+ Improved

Additional Information

- When documenting the effects of pain medication, the numeric scale (not the up/down arrows) must be used
- Any adverse effects must be noted in the Comments Section

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TRANSFER OF CARE

CONDITION ON TRANSFER

Definition

Area of form used to document the patient's condition when care is transferred to another EMS provider or to a receiving facility

Field Values

- Free text

Additional Information

- Use this area to provide a brief summary of the patient's condition

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

MORPHINE

Definition

Amount of morphine given and wasted, if applicable

Field Values

- Given: ____mg
- Wasted: ____mg

Additional Information

- A registered nurse from the receiving facility who witnessed the wastage must print and sign their name in the space provided

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

MIDAZOLAM

Definition

Amount of midazolam given and wasted, if applicable

Field Values

- Given: ____mg
- Wasted: ____mg

Additional Information

- A registered nurse from the receiving facility who witnessed the wastage must print and sign their name in the space provided

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

FENTANYL

Definition

Amount of fentanyl given and wasted, if applicable

Field Values

- Given: ____mcg
- Wasted: ____mcg

Additional Information

- A registered nurse from the receiving facility who witnessed the wastage must print and sign their name in the space provided

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TOTAL IV/IO FLUIDS RECEIVED

Definition

The total amount of intravenous or intraosseous fluids the patient received prior to arrival at the receiving facility

Field Values

- Up to four-digit numeric value

Additional Information

- IV/IO fluid challenge volume should also be documented here

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

CARE TRANSFERRED TO

Definition

The level of care the patient was transferred to

Field Values

- **ALS:** Care of the patient was transferred to an ALS provider
- **BLS:** Care of the patient was transferred to a BLS provider
- **Helicopter:** Care of the patient was transferred to the helicopter crew
- **Facility:** Care of the patient was transferred to the receiving facility

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TRANSFER VS TIME

Definition

Time of day vital signs were obtained for transfer of care

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Establishes care intervals and incident timelines
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TM

Definition

The number of the team member who transferred care of the patient

Field Values

- Free text

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

BP

Definition

Numeric values of the patient's systolic and/or diastolic blood pressure

Field Values

- Up to three-digit numeric value
- Documented as numeric systolic value / numeric diastolic value

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PULSE

Definition

Numeric value of the patient's pulse rate at transfer of care

Field Values

- Up to three-digit numeric value

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

RR

Definition

Numeric value of the patient's unassisted respiratory rate at transfer of care

Field Values

- Up to two-digit numeric value

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

O2 SAT

Definition

Numeric value of the patient's oxygen saturation at transfer of care

Field Values

- Up to three-digit value from 0 to 100

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

CO2

Definition

Numeric CO2 measurement from the capnometer at transfer of care

Field Values

- Up to two-digit value

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

RHYTHM

Definition

Two- or three-letter code indicating the patient's subsequent rhythm on the cardiac monitor

Field Values

1HB First degree Heart Block	AFI Atrial Fibrillation
3HB Third degree Heart Block	AGO Agonal Rhythm
AFL Atrial Flutter	AVR Accelerated Ventricular Rhythm
ASY Asystole	JR Junctional Rhythm
IV Idioventricular Rhythm	PAC Premature Atrial Contraction
PAT Paroxysmal Atrial Tachycardia	PEA Pulseless Electrical Activity
PM Pacemaker Rhythm	PST Paroxysmal Supraventricular Tachycardia
PVC Premature Ventricular Contraction	SA Sinus Arrhythmia
SB Sinus Bradycardia	SR Sinus Rhythm
ST Sinus Tachycardia	SVT Supraventricular Tachycardia
VF Ventricular Fibrillation	VT Ventricular Tachycardia
2HB Second degree Heart Block	

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

CPAP PRESSURE

Definition

Numeric pressure reading from the CPAP device at transfer of care, if applicable

Field Values

- Can include up to two decimal places (format example 99.99)

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

GCS E

Definition

The Glasgow Coma Scale numerical value that corresponds to the patient's eye opening response to stimuli at transfer of care

Field Values

- **4:** Spontaneous – opens eyes spontaneously, no stimuli required
- **3:** To Verbal – opens eyes only when spoken to or asked
- **2:** To Pain – opens eyes only in response to noxious stimuli such as sternal rub or nail bed pressure
- **1:** None – patient does not open eyes in response to noxious stimuli

Additional Information

- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Element necessary to calculate the overall GCS score
- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

GCS V

Definition

The Glasgow Coma Scale numerical value that corresponds to the patient's verbal response to stimuli at transfer of care

Field Values – Adult and Verbal Pediatric Patients

- **5:** Oriented x 3 – patient is oriented to person, time, and place
- **4:** Confused – patient may respond to questions coherently, but is disoriented or confused
- **3:** Inappropriate – random words or speech unrelated to questions or conversation
- **2:** Incomprehensible – makes incoherent sounds or moans only
- **1:** None – patient has no verbal response to noxious stimuli

Field Values – Infants and Toddlers

- **5:** Smiles and tracks objects, speech appropriate for age
- **4:** Cries but consolable, or confused
- **3:** Inconsistently consolable, or random words
- **2:** Moaning, incoherent sounds only
- **1:** No verbal response to noxious stimuli

Additional Information

- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Element necessary to calculate the overall GCS score
- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

GCS M

Definition

The Glasgow Coma Scale numerical value that corresponds to the patient's motor response to stimuli at transfer of care

Field Values

- **6:** Obedient – obeys verbal commands / spontaneous purposeful movement
- **5:** Purposeful – purposeful movement is made in response to noxious stimuli (e.g., attempts to push away or grab source of stimuli)
- **4:** Withdrawal – withdraws body part from source of noxious stimuli
- **3:** Flexion –extremities move towards body core in response to noxious stimuli (decorticate posturing)
- **2:** Extension – extremities move away from body core in response to noxious stimuli (decerebrate posturing)
- **1:** None – patient has no motor response to noxious stimuli

Additional Information

- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Element necessary to calculate the overall GCS score
- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

GCS TOTAL

Definition

Sum of the three numerical values documented for each element of the patient's Glasgow Coma Scale score at transfer of care

Field Values

- One- or two-digit numeric value between 3 and 15

Additional Information

- Maximum total score is 15, which is considered normal. Minimum score possible is 3, which may indicate severe or fatal brain injury
 - 3 to 8 may indicate severe brain injury
 - 9 to 13 may indicate moderate brain injury
 - 14 or 15 may indicate mild or no brain injury
- **REQUIRED** on all patients who are one year of age and older
- Adult and pediatric Glasgow Coma Scales are found on the back of the red copy

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SIGNATURE TM COMPLETING FORM

Definition

Signature of the ALS team members who have primary responsibility for the patient or ALS/BLS members who have completed the form

Field Values

- Free text

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

ADVANCED LIFE SUPPORT CONTINUATION FORM

INCIDENT INFORMATION SECTION

Definition

The top section of the ALS Continuation Form that needs to be completely filled out if an ALS Continuation Form is used

Field Values

- Date: Date of the incident, enter in MMDDYYYY format
- Provider Code: Two letter code of the provider agency responding to the incident
- Unit: Unit letter and number designation for the responding provider unit
- Seq. #: Must exactly match the original EMS Form
- Sec. Seq. #: When applicable- should only be filled in when two provider agencies have participated in the run and each has completed their own EMS Report Form
- Patient Name: The patient's first and last name
- Incident #: Incident number assigned by the 911 or Dispatch Center

Additional Information

- Complete each area accurately

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

VITAL SIGNS AND MEDICATION/DEFIB SECTION

Definition

The section of the ALS Continuation Form that needs to be completely filled out when additional vital signs are taken or medications are given

Field Values

Vital Signs:

- Time: Time of day the patient's vitals are obtained
- SBP: Numeric value of the patient's systolic blood pressure
- DBP: Numeric value of the patient's diastolic blood pressure
- P: Numeric value of the patient's pulse rate
- R: Numeric value of the patient's unassisted respiratory rate
- SpO2: Numeric value of the patient's oxygen saturation
- Pain (0-10): Numeric value indicating the patient's subjective pain level

Meds/Defib:

- Time: Time of day when medication or treatment was administered and/or when a subsequent 3-lead rhythm was read from the cardiac monitor
- TM#: The number of the team member who administered medication or treatment to the patient and/or who read the subsequent 3-lead rhythm from the cardiac monitor
- ECG: Two- or three-letter code indicating the patient's subsequent rhythm(s) on the cardiac monitor, if applicable
- Med/Defib: The medication, defibrillation, and/or cardioversion administered to the patient
- Dose: The medication dosage administered or the joules delivered during defibrillation/cardioversion
- Route: Two-letter code indicating the route of medication administration
- Result: The effect the medication or treatment had on the patient

Additional Information

- Complete this section in the same way as the Vitals and Meds/Defib sections of the EMS Report Form

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

REASON FOR ADVANCED AIRWAY

Definition

The reason(s) that the patient needs an advanced airway

Field Values

- **Resp Arrest**
- **Cardiopulmonary Arrest**
- **HYpoventilation**
- **Profoundly Altered**
- **OTher**

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PM

Definition

The identification number of the team member who attempted endotracheal tube or King LTS-D placement on the patient

Field Values

- Free text

Additional Information

- The format used for Paramedics is “P” followed by the L.A. County issued accreditation number– example P1234

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SUCCESS

Definition

Checkbox indicating whether endotracheal tube or King LTS-D placement was successful

Field Values

- **Y:** Yes
- **N:** No

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TIME ET/KING START

Definition

Time of day endotracheal tube or King LTS-D placement attempt was started

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Establishes care intervals and incident timelines
- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TIME ET/KING SUCCESS

Definition

Time of day endotracheal tube/King LTS-D placement was successfully completed

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Establishes care intervals and incident timelines
- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

ETT/KING SIZE

Definition

The size of the endotracheal tube or King LTS-D placed

Field Values

- Up to three-digit numeric value

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

DIFFICULT AIRWAY TECHNIQUES

Definition

Checkbox indicating techniques utilized to assist with endotracheal tube or King LTS-D placement

Field Values

- **Flex Guide**
- **External Laryngeal Manipulation**

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

TUBE PLACEMENT MARK AT TEETH

Definition

The centimeter mark at the teeth as a result of endotracheal tube or King LTS-D placement

Field Values

- Two-digit numeric value

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

COMPLICATION(S) DURING TUBE PLACEMENT

Definition

Checkbox indicating complication(s) that occurred during endotracheal tube or King airway insertion

Field Values

- **None:** No complications were encountered during advanced airway placement
- **Emesis/Secretions/Blood:** Excess emesis or secretions hampered advanced airway placement
- **Gastric Distention:** Gastric distention was observed
- **Clenching:** Patient clenched down as advanced airway placement was attempted
- **Anatomy:** Anatomical factors affected advanced airway placement
- **Gag Reflex:** Patient had a gag reflex, which hampered advanced airway placement
- **Other:** Other complications encountered that are not listed above

Additional Information

- If “None” is marked, do not mark any other checkboxes
- If “None” is not marked, check all that apply

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

INITIAL ADVANCED AIRWAY PLACEMENT CONFIRMATION

Definition

Checkbox indicating the method utilized to confirm correct endotracheal tube or King LTS-D placement

Field Values

- **Bilateral Breath Sounds:** Patient had bilateral breath sounds following advanced airway placement
- **Bilateral Chest Rise:** Bilateral chest rise is observed following advanced airway placement
- **Absent Gastric Sounds:** No breath sounds are auscultated over the gastric area following advanced airway placement
- **EID No Resistance:** The EID is used to check advanced airway placement

Additional Information

- Mark all that apply

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

CAPNOGRAPHY MEASUREMENT

Definition

The numeric CO₂ measurement from the capnometer after endotracheal tube or King LTS-D placement

Field Values

- Up to two-digit numeric value

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

EtCO₂ DETECTOR COLORIMETRIC

Definition

Checkbox indicating the color observed when the carbon dioxide colorimetric device is used after endotracheal tube or King LTS-D placement

Field Values

- **Y:** Yellow
- **T:** Tan
- **P:** Purple

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

WAVEFORM CAPNOGRAPHY

Definition

Indicates whether or not a waveform is observed on the capnography tracing

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- Attach a printout of the waveform Capnography to the ALS Continuation Form

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

**ONGOING ADVANCED AIRWAY PLACEMENT
CONFIRMATION**

ONGOING VERIFICATION TIME

Definition

Time of day endotracheal tube or King LTS-D placement is verified

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Establishes care intervals and incident timelines
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

ONGOING VERIFICATION VALUE

Definition

Checkbox indicating the result of the ongoing verification endotracheal tube or King LTS-D placement assessment

Field Values

- **Verified Correct Placement:** Tube placement is correct upon reassessment
- **Suspected Dislodgement:** Tube seems to have dislodged upon patient movement

Additional Information

- If dislodgment is suspected, comment on the measures taken to correct the situation (tube removed, patient re-intubated, etc.)

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SPONTANEOUS RESPIRATIONS

Definition

Checkbox indicating whether the patient had spontaneous respirations upon transfer of care

Field Values

- **Y:** Yes
- **N:** No

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

ONGOING VERIFICATION TIME

Definition

Time of day endotracheal tube or King LTS-D placement is verified

Field Values

- Collected as HHMM
- Use 24-hour clock

Uses

- Establishes care intervals and incident timelines
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

ONGOING VERIFICATION VALUE

Definition

Checkbox indicating the result of the ongoing verification endotracheal tube or King LTS-D placement assessment

Field Values

- **Verified Correct Placement:** Tube placement is correct upon reassessment
- **Suspected Dislodgement:** Tube seems to have dislodged upon patient movement

Additional Information

- If dislodgment is suspected, comment on the measures taken to correct the situation (tube removed, patient re-intubated, etc.)

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SPONTANEOUS RESPIRATIONS

Definition

Checkbox indicating whether the patient had spontaneous respirations upon transfer of care

Field Values

- **Y:** Yes
- **N:** No

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

REASON ALS AIRWAY UNABLE

REASON(S) ALS AIRWAY UNABLE

Definition

Checkboxes indicating the reason(s) an advanced ALS airway was unable to be inserted

Field Values

- Positive **G**ag Reflex
- **A**natomy
- **B**lood/Secretions
- Unable to visualize **C**ords
- Unable to visualize **E**piglottis
- Equipment **F**ailure
- Logistical/Environmental Issues

Additional Information

- Mark all that apply
- Describe any logistical/environmental issues (patient access, safety hazards, etc.) encountered on the line provided
- If an advanced airway was not possible, the patient should be ventilated using a bag-mask-device

Uses

- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

CARDIAC ARREST/ RESUSCITATION

RESTORATION OF PULSE TIME

Definition

Time of day when return of spontaneous circulation (ROSC) occurred

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- Document even if the pulses are lost prior to arrival at the receiving facility
- Patients in non-traumatic cardiac arrest with ROSC in the field should be transported to the nearest available STEMI Receiving Center (SRC)

Uses

- Establishes care intervals and incident timelines
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

RESUSCITATION D/C BY BASE

Definition

Time of day when patient was pronounced dead by the base hospital physician

Field Values

- Collected as HHMM
- Use 24-hour clock

Additional Information

- **Do not** use this field to document time EMS personnel terminated resuscitation in the field

Uses

- Establishes care intervals and incident timelines
- Provides documentation of assessment and/or care
- Assists with determination of appropriate treatment and transport
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PRONOUNCED BY

Definition

The name of the base hospital physician that pronounced the patient dead

Field Values

- Free text

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PRONOUNCED RHYTHM

Definition

Two- or three-letter code identifying the cardiac rhythm reported when the patient was pronounced dead or resuscitation was terminated

Field Values

AGO	Agonal Rhythm	PEA	Pulseless Electrical Activity
ASY	Asystole	VF	Ventricular Fibrillation
IV	Idioventricular Rhythm		

Additional Information

- PEA is not a defined rhythm, but rather a finding that may be present at time of pronouncement where electrical activity and/or rhythm seen on the cardiac monitor does not produce a palpable pulse or auscultatable heartbeat

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

COMMENTS

Definition

Area used to describe any special or unusual circumstances that may have occurred during the attempted resuscitation

Field Values

- Free text

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

VERIFICATION OF TUBE PLACEMENT

VERIFICATION TECHNIQUE(S)

Definition

Checkbox indicating the technique(s) utilized by the receiving facility physician to confirm endotracheal tube or King LTS-D placement

Field Values

- **V:** Visualization
- **A:** Auscultation
- **E:** EtCO₂
- **X:** X-Ray

Additional Information

- Technique may be identified by ED physician (or designee)
- May attach a copy of the waveform Capnography printout as an alternate means of verifying tube placement (physician signature is not required if waveform is attached)

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

PLACEMENT

Definition

The receiving facility physician's determination of the anatomical position of the endotracheal tube or King LTS-D placed by EMS personnel

Field Values

- **T:** Trachea
- **E:** Esophagus
- **R:** Right Main

Additional Information

- May attach a copy of the waveform Capnography printout as an alternate means of verifying tube placement (physician signature is not required if waveform is attached)

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

SIGNED VERIFICATION

Definition

Checkbox indicating whether or not a signed verification of endotracheal tube or King LTS-D placement was obtained by EMS personnel

Field Values

- **Y:** Yes
- **N:** No

Additional Information

- May attach a copy of the waveform Capnography printout as an alternate means of verifying tube placement (physician signature is not required if waveform is attached)

Uses

- Provides documentation of assessment and/or care
- System evaluation and monitoring

Data Source Hierarchy

- EMS provider

APPENDIX

PROVIDER IMPRESSION DEFINITIONS

Provider Impression (PI) Name	PI Code	Treatment Protocol (TP)	TP Code	Guidelines for use of PI
Abdominal Pain/Problems (GI/GU)	ABOP	GI/GU Emergencies	1205 1205-P	For any pain or problem in the abdominal/flank region that does not have a more specific PI, includes post-surgical complications.
Agitated Delirium	AGDE	Agitated Delirium	1208 1208-P	For Agitated Delirium only. NOT for psychiatric emergencies or other causes of agitation without delirium.
Airway Obstruction/ Choking	CHOK	Airway Obstruction	1234 1234-P	For any upper airway emergency including choking, foreign body, swelling, stridor, croup, and obstructed tracheostomy
Alcohol Intoxication	ETOH	Overdose/ Poisoning/Ingestion	1241 1241-P	For alcohol intoxication if it is the primary problem. Use of secondary PI if the patient has another acute emergency.
Allergic Reaction	ALRX	Allergy	1219 1219-P	For any simple allergic reaction that is isolated to the skin (hives/ urticarial only) and does not meet definition of anaphylaxis
ALOC - Not Hypoglycemia or Seizure	ALOC	ALOC	1229 1229-P	For altered mental status not attributed to a more specific PI (i.e., cause unknown). Use as secondary PI when cause known.
Anaphylaxis	ANPH	Allergy	1219 1219-P	For anaphylaxis.
Behavioral/ Psychiatric Crisis	PSYC	Behavioral/ Psychiatric Crisis	1209 1209-P	For psychiatric crisis that is the primary problem. NOT for anxiety/agitation secondary to medical etiology, use PI related to medical issue.
Body Pain – Non-Traumatic	BPNT	General Medical	1202 1202-P	For pain not related to trauma that is not localized to chest, abdomen, head, or extremity.
BRUE	BRUE	BRUE	1235-P	For a brief resolved unexplained event (BRUE). Patient must be ≤12 months of age and back to baseline on assessment.
Burns	BURN	Burns	1220 1220-P	For any burn injury to skin. For inhalation injury use PI Inhalation Injury. Use with PI Traumatic Injury if other trauma present.
Carbon Monoxide	COMO	Carbon Monoxide Exposure	1238 1238-P	For suspected or known carbon monoxide exposure.
Cardiac Arrest – Non-traumatic	CANT	Cardiac Arrest	1210 1210-P	For non-traumatic cardiac arrest in which any resuscitation is initiated, NOT dead on arrival

Provider Impression (PI) Name	PI Code	Treatment Protocol (TP)	TP Code	Guidelines for use of PI
Cardiac Dysrhythmia	DYSR	Cardiac Dysrhythmia – Bradycardia	1212 1212-P	For any bradycardic rhythm <60bpm.
Cardiac Dysrhythmia	DYSR	Cardiac Dysrhythmia – Tachycardia	1213 1213-P	For any tachydysrhythmia and for sinus tachycardia (ST) of unclear etiology. NOT for ST secondary to known cause – use more specific PI (e.g., Fever)
Chest Pain – Not Cardiac	CPNC	General Medical	1202 1202-P	For musculoskeletal and pleuritic pain and any chest pain that is NOT of possible cardiovascular etiology.
Chest Pain – STEMI	CPMI	Cardiac Chest Pain	1211	For any suspected STEMI, with or without chest pain.
Chest Pain – Suspected Cardiac	CPSC	Cardiac Chest Pain	1211	For any chest pain that is of possible cardiovascular etiology but NOT STEMI (e.g., NSTEMI, pericarditis, dissection).
Childbirth (Mother)	BRTH	Childbirth (Mother)	1215 1215-P	For delivery or imminent delivery of a fetus beyond the first trimester (12 weeks). For <12 weeks use PI Pregnancy Complications.
Cold / Flu Symptoms	COFL	General Medical	1202 1202-P	For minor respiratory illness in a patient without shortness of breath or wheezing; must have normal respiratory rate and O ₂ sat (if available).
Diarrhea	DRHA	GI/GU Emergencies	1205 1205-P	For diarrhea without bleeding. NOT for melena, use PI Upper GI Bleeding.
Dizziness/Vertigo	DIZZ	Dizziness/Vertigo	1230 1230-P	For lightheadedness or vertigo, without syncope.
DOA – Obvious Death	DEAD	Cardiac Arrest	1210 1210-P	For non-traumatic cardiac arrest found dead on arrival such that no resuscitation is initiated.
Dystonic Reaction	DYRX	Dystonic Reaction	1239 1239-P	For suspected dystonic reaction (i.e., reaction, typically from antipsychotic medications, causing abnormal contraction of head and neck muscles.)
Electrocution	ELCT	Electrocution	1221 1221-P	For any electrocution injury.
ENT / Dental Emergencies	ENTP	ENT / Dental Emergencies	1226 1226-P	For a problem located in the ear, nose, throat area, except NOT epistaxis – use PI Epistaxis, NOT airway obstruction – use PI Airway Obstruction.
Epistaxis	NOBL	ENT / Dental Emergencies	1226 1226-P	For any bleeding from the nares.
Extremity Pain/ Swelling – Non-Traumatic	EXNT	General Medical	1202 1202-P	For pain, swelling, or other non-traumatic problem of an extremity, includes rashes and non-traumatic bleeding (e.g., varicose vein bleed).
Eye Problem – Unspecified	EYEP	Eye Problem	1228 1228-P	For any pain or problem of the eye or periorbital region, use with PI Traumatic Injury if a traumatic mechanism.

Provider Impression (PI) Name	PI Code	Treatment Protocol (TP)	TP Code	Guidelines for use of PI
Fever	FEVR	Fever	1204 1204-P	For reported or tactile fever that is NOT suspected sepsis. For sepsis use PI Sepsis.
Genitourinary Disorder – Unspecified	GUDD	GI/GU Emergencies	1205 1205-P	For urinary or genital related complaints, except NOT vaginal bleeding – use PI Vaginal Bleeding, NOT trauma-related – use PI Traumatic Injury.
HazMat Exposure	DCON	HAZMAT	1240 1240-P	For any hazardous material (chemical) exposure. May use with another PI (e.g., Inhalation Injury or Burns) when applicable.
Headache – Non-Traumatic	HPNT	General Medical	1202 1202-P	For non-traumatic headache or head pain.
Hyperglycemia	HYPR	Diabetic Emergencies	1203 1203-P	For patients with primary concern for hyperglycemia and/or associated symptoms (blurred vision, frequent urination or thirst) without more specific PI and those requiring field treatment. DO NOT list for incidental finding of hyperglycemia related to another illness.
Hypertension	HYTN	General Medical	1202 1202-P	For patients with primary concern for hypertension without symptoms related to a more specific PI. For symptomatic patients, use related PI as primary (e.g., Headache – Non-traumatic) and Hypertension as secondary. DO NOT list for incidental finding of hypertension.
Hyperthermia	HEAT	Hyperthermia (Environmental)	1222 1222-P	For environmental exposure causing hyperthermia, e.g., heat exhaustion and heat stroke, drugs may also be a contributing factor.
Hypoglycemia	HYPO	Diabetic Emergencies	1203 1203-P	For glucose <60mg/dL.
Hypotension	HOTN	Shock / Hypotension	1207 1207-P	For SBP <90mmHg in adults or <70mmHg in children with transient low BP or rapidly responds to fluid resuscitation and without signs of shock.
Hypothermia / Cold Injury	COLD	Hypothermia / Cold Injury	1223 1223-P	For environmental exposures causing hypothermia and/or frostbite injury.
Inhalation Injury	INHL	Inhalation Injury	1236 1236-P	For any signs/symptoms related to inhaling a gas or substance other than smoke or carbon monoxide.
Lower GI Bleeding	LOGI	GI/GU Emergencies	1205 1205-P	For bleeding from the rectum and/or bright red bloody stools.

Provider Impression (PI) Name	PI Code	Treatment Protocol (TP)	TP Code	Guidelines for use of PI
Medical Device Malfunction – Fail	FAIL	Medical Device Malfunction	1206 1206-P	For a medical device that fails, including VADs, insulin pumps, and shunts. Usually for internal devices, may be used for vent failure if patient is asymptomatic. For symptomatic patients, use PI related to symptoms (e.g., Automated Internal Defibrillator firing – use PI associated with complaint such as Cardiac Dysrhythmia – Tachycardia).
Nausea / Vomiting	NAVM	GI/GU Emergencies	1205 1205-P	For any nausea or vomiting without blood. Not for adverse reaction to opiate administration by EMS, manage with primary PI/TP.
Newborn	BABY	Newborn/Neonatal	1216-P	For any newborn deliveries in the field.
No Medical Complaint	NOMC	Assessment	1201	For patients without any medical, psychiatric or traumatic complaint and no signs of illness on assessment. Usually reserved for non-transports.
Overdose/ Poisoning/Ingestion	ODPO	Overdose/ Poisoning/ Ingestion	1241 1241-P	For any intentional or unintentional overdose/poisoning by any route, includes illicit substances and prescription medications, overdose and/or adverse reactions.
Palpitations	PALP	General Medical	1202 1202-P	For any patient complaint of palpitations (e.g., rapid heart rate beat, skipped beats, chest fluttering) with normal rate and rhythm on the ECG.
Pregnancy Complications	PREG	Pregnancy Complication	1217 1217-P	For any pregnancy-related condition that is not labor. Includes vaginal bleeding in pregnancy, hypertension, and complications of delivery.
Pregnancy / Labor	LABR	Pregnancy Labor	1218 1218-P	For contractions without imminent childbirth.
Respiratory Arrest / Failure	RARF	Respiratory Distress	1237 1237-P	For patients requiring positive-pressure ventilation and/or hypoxia despite 100% oxygen.
Respiratory Distress / Bronchospasm	SOBB	Respiratory Distress	1237 1237-P	For COPD/asthma exacerbations and any bronchospasms/wheezing not from pulmonary edema.
Respiratory Distress / Other	RDOT	Respiratory Distress	1237 1237-P	For patients with pulmonary disease that is not edema or bronchospasm, includes suspected pneumonia, PE, pneumothorax and non-pulmonary and unknown causes of respiratory distress.
Respiratory Distress / Pulmonary Edema / CHF	CHFF	Pulmonary Edema / CHF	1214	For congestive heart failure exacerbation.
Seizure – Active	SEAC	Seizure	1231 1231-P	For seizure witnessed by EMS, whether treated or not.

Provider Impression (PI) Name	PI Code	Treatment Protocol (TP)	TP Code	Guidelines for use of PI
Seizure – Postictal	SEPI	Seizure	1231 1231-P	For any seizure that stopped prior to EMS arrival and there is no further seizure activity during EMS contact.
Sepsis	SEPS	Fever / Sepsis	1204 1204-P	For patients with suspected sepsis (i.e., signs suggestive of sepsis including fever, tachycardia, suspected infection).
Shock	SHOK	Shock / Hypotension	1207 1207-P	For patients with poor perfusion not rapidly responsive to IV fluids.
Smoke Inhalation	SMOK	Inhalation Injury	1236 1236-P	For patients with smoke inhalation.
Stings / Venomous Bites	STNG	Stings / Venomous Bites	1224 1224-P	For snakes, scorpion, insects, and marine envenomations (stingrays, jelly fish). NOT for animal bites, use PI traumatic injury.
Stroke / CVA / TIA	STRK	Stroke / CVA / TIA	1232 1232-P	For suspected stroke or transient ischemic attack (stroke symptoms that resolve rapidly).
Submersion / Drowning	DRWN	Submersion	1225 1225-P	For any submersion injury, including drowning and dive (decompression) emergencies.
Syncope / Near Syncope	SYNC	Syncope / Near Syncope	1233 1233-P	For syncope (transient loss of consciousness). NOT for cardiac arrest, use PI Cardiac Arrest – Non-traumatic only.
Traumatic Arrest – Blunt	CABT	Traumatic Arrest	1243 1243-P	For cardiac arrest with blunt traumatic mechanism, including those declared deceased in the field by Ref. 814. NOT for trauma sustained after cardiac arrest, use PI Cardiac Arrest – Non- traumatic.
Traumatic Arrest – Penetrating	CAPT	Traumatic Arrest	1243 1243-P	For cardiac arrest with penetrating traumatic mechanism, including those declared deceased in the field by Ref. 814.
Traumatic Injury	TRMA	Traumatic Injury	1242 1242-P 1244 1244-P	For any trauma-related injury including crush injury and conducted electrical weapons (CEW). May use in addition to another PI when medical condition also present (e.g., for syncope with trauma – use PI Syncope and PI Traumatic Injury; for CEW use in patient with agitated delirium – use PI Agitated Delirium and PI Traumatic Injury).
Upper GI Bleeding	UPGI	GI/GU Emergencies	1205 1205-P	For vomiting blood or coffee ground emesis, and for melena (i.e., black, tarry stools).
Vaginal Bleeding	VABL	GI/GU Emergencies	1205 1205-P	For vaginal bleeding in the NON-pregnant patient. For vaginal bleeding in pregnancy use PI Pregnancy Complications.
Weakness – General	WEAK	General Weakness	1202 1202-P	For nonfocal weakness, general malaise, and any nonspecific ‘sick’ symptoms.